SEC Form 4	
------------	--

Instruction 1(b).

## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL	

OMB Number:	3235-0287
Estimated average bi	urden
hours per response:	0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

			or Section So(ii) of the investment Company Act of 1940					
1. Name and Address of Reporting Person <sup>*</sup> Buchanan Lucas W.			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Silk Road Medical Inc</u> [ SILK ]		ationship of Reporting Person ( all applicable) Director	10% Owner		
(Last) (First) (Middle) C/O SILK ROAD MEDICAL, INC. 1213 INNSBRUCK DRIVE		<b>`</b>	3. Date of Earliest Transaction (Month/Day/Year) 10/04/2023	X	Officer (give title below) COO/CFO	Other (specify below)		
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicab Line)				
				X	Form filed by One Reporting Person			
(Street) SUNNYVALE	CA	94089			Form filed by More than Person	One Reporting		
(City)	(State)	(Zip)	Rule 10b5-1(c) Transaction Indication					
			Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.					

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		Transaction Code (Instr.		Transaction Code (Instr.		Transaction Code (Instr.		Transaction Code (Instr.		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)										
Common Stock	10/04/2023		S		2,662 <sup>(1)</sup>	D	\$15.223	435,848	D									
Common Stock								13,518	Ι	Buchanan Grandchildren's Irrevocable Trust <sup>(2)</sup>								

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(0.9., parte, cano, contanto, opinono, contanto cocantico)																
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code (	ansaction of ode (Instr. Derivative		f Expiration Date (Month/Day/Year) eccurities ccquired A) or isposed f (D) nstr. 3, 4		of Expiration Date Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		ate	Amount of		Securities Security Se Underlying (Instr. 5) Be Derivative Security (Instr. 5) Fo		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. Represents shares that have been sold by the Reporting Person to satisfy income tax withholding and remittance obligations in connection with the vesting and net settlement of restricted stock units previously reported.

2. These shares are held directly by the Buchanan Grandchildren's Irrevocable Trust, for which the Reporting Person serves as a co-trustee.

Remarks:

<u>/s/Mhairi</u>	Jones,	by	power of

attorney

\*\* Signature of Reporting Person Date

10/06/2023

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.