FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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hours per response.	0.5							

	Check this box if no longer subject to Section 16. Form 4 or Form 5										
	Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).										

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Davis Andrew S.								e <b>and</b> Tid <u>Medi</u>			Symbol ILK ]	(Check	all application all applications all all applications all	nship of Reporting I applicable) Director Officer (give title		on(s) to Issu 10% Ov Other (s	/ner		
	(Last) (First) (Middle) C/O SILK ROAD MEDICAL, INC. 1213 INNSBRUCK DRIVE					Date o 5/01/2		iest Tran	saction	(Month	n/Day/Year)	X Officer (give title Officer (specify below)  EVPGlobal Sales& Marketing							
(Street) SUNNY (City)			94089 (Zip)		_ 4.									6. Indiv Line) X					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Exe ) if an	y	ed n Date, ay/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			nd 5) Securiti Benefic Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 05/01/20					/2020	20			M <sup>(1)</sup>		13,270	A	\$1	.46	31,485			D	
Common Stock 05/01/20				/2020	20		<b>S</b> <sup>(1)</sup>		13,270	D	\$41.0	305(2)	18,215			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I		ate, Transa Code (				6. Date Expirat (Month	tion Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		S	Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amo or Nun of Sha	.					
Option (right to buy)	\$1.46	05/01/2020			M <sup>(1)</sup>			13,270	05/05/2	2016 <sup>(3)</sup>	06/23/2025	Commo Stock	<sup>n</sup> 13,	270	\$0	92,448	3	D	

## **Explanation of Responses:**

- 1. The option exercise and sale reported on this Form 4 were effected pursuant to Rule 10b5-1 Trading Plan adopted by the reporting person on September 11, 2019.
- 2. This transaction was executed in multiple trades at price ranging from \$39.46 to \$43.35. The price reported above reflects the weighted average sale price. The Reporting Person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 3. All of the shares subject to this option are fully vested and exercisable as of the date hereof.

## Remarks:

/s/Mhairi Jones, by power of attornev

05/05/2020

\*\* Signature of Reporting Person

Date

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.