SEC For																					
FORM 4 UNIT				NITED ST	ITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549																
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).					-iled pu	rsuant	tion 16(a) of the	Secur	NEFI rities Exc ompany		CMB Number: 323 Estimated average burden hours per response:			0.5						
1. Name and Address of Reporting Person [*] <u>Rogers Erica J.</u>					2.	Issuer	Name	and Tio		rading	Symbol		Relationship o heck all applic X Directo	able) r		10% Ow) to Issuer 10% Owner Other (specify				
(Last)(First)(Middle)C/O SILK ROAD MEDICAL, INC.1213 INNSBRUCK DRIVE					Date o 2/12/2	est Tran	saction ((Month	n/Day/Ye		X Oncer (give the Other (spechy below) below) President and CEO										
(Street) SUNNYVALE CA 940				189	_ 4. _	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	,	(Zip)) I - Non-Der	ivativ	/e Se	curit	ies A	cauire	d. Di	spose	d of	. or Bei	neficia	llv Owned						
1. Title of Security (Instr. 3) (Month/Day/Year)				ar) if	2A. Deemed Execution Date,			nsaction le (Instr.	4. Securities Acqu		Acqui	uired (A) or		5. Amount of Securities Beneficially Owned Following Reported		6. Owners Form: Dire (D) or Indir (I) (Instr. 4)	rect Indirec rect Benefic Owners	Indirect t Beneficial Ownership (Instr.			
								Cod	ie V	Amo	ount	(A) o (D)	Price		Transaction(s (Instr. 3 and 4			4)			
Common Stock				12/12/202	2			M ⁽	1)	10,000	,000) A	\$1.6		256,199		D				
Common Stock			12/12/2022				S (1	.)	10	10,000 I		\$53.8501 ⁽²⁾		246,199		D					
Common Stock															83,843		The		2		
			Tab	ole II - Deriv (e.g.,									or Bene le secu		y Owned						
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		4. Transa Code 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Inst 3, 4 and 5)		Expirat	ion Da	Exercisable and on Date Day/Year)		7. Title an of Securit Underlyin Derivative (Instr. 3 an	ies g security	Derivative Security		lumber of ivative curities neficially ned lowing borted nsaction(s) itr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date Title Expiration Date Expiration Title Expiration Amount or Number Shares		r								
Option (right to buy)	\$1.6	12/12/2022			M ⁽¹⁾			10,000	09/04/2	016 ⁽⁴⁾	08/04/2	2026	Common Stock	10,00	0 \$0		42,654	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 August 8, 2022.

2. This transaction was executed in multiple trades at price ranging from \$53.17 to \$54.52. 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. These shares are held directly by Kevin J. Surace and Erica J. Rogers, as Trustees of The Surace Rogers Family Trust.

4. 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 attorney

12/14/2022

** 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.