FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	D C	20540
Vashington,	D.C.	20549

STATEMENT	OF CHA	NGES IN I	BENEFICIAL	OWNERSI	HIP

OMB APPROVAL										
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Check this box if no longer subject to 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* Chou Tony M.					2. Issuer Name and Ticker or Trading Symbol Silk Road Medical Inc [SILK]						(Che	ck all applic Directo			10% Ov	ner		
	K ROAD M	irst) IEDICAL, INC.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/17/2021								Officer below)	(give title		Other (s below)	pecify
(Street)	VALE C		94089		4.						Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)		-	Person												
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date					2A. Deemed Execution Date, if any (Month/Day/Year)		Code (I					5. Amoun Securities Beneficia Owned Fo	Form (D) or ollowing (I) (In		Direct Indirect str. 4)	7. Nature of ndirect Beneficial Ownership		
							Code	v	Amount	(A) or (D)			Transaction(s) (Instr. 3 and 4)			Instr. 4)		
Common Stock 0			06/1	7/20	7/2021		A		570 ⁽¹⁾ A		\$0	97,929			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
			Transa Code (ansaction Derivative E			6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Seci (Instr. 3 and 4)			f g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	Owner Form Direct or Inc (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)		Date Exercisabl		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	on(s)		
Option (right to buy)	\$50.4	06/17/2021			A		4,066		06/05/2022	2(2)	06/17/2031	Common Stock	4,066	\$0	4,066	6	D	
Option (right to buy)	\$50.4	06/17/2021			A		1,886 ⁽³⁾		09/05/2021	1 ⁽⁴⁾	06/17/2031	Common Stock	1,886	\$0	1,886	6	D	

Explanation of Responses:

- 1. The reported securities are represented by restricted stock units ("RSUs"), each of which represents a contingent right to receive one share of SILK common stock. All of the RSUs vest on the earlier of (i) the one-year anniversary of the date the award is granted or (ii) the day prior to the date of the Issuer's 2022 annual meeting of stockholders, subject to the Reporting Person continuing as a service provider through
- 2. All of the shares subject to the option shall vest on the earlier of (i) the one-year anniversary of the date the award is granted or (ii) the day prior to the date of the Issuer's 2022 annual meeting of stockholders, subject to the Reporting Person continuing as a service provider through each such date.
- 3. The shares subject to the options represent cash retainer that the Reporting Person elected to receive in the form of stock options.
- 4. One fourth of the shares subject to the option shall vest on each of September 5, 2021, December 5, 2021, March 5, 2022, and the date of the Issuer's 2022 annual meeting of stockholders, subject to the Reporting Person continuing as a service provider through each such date.

Remarks:

/s/Mhairi Jones, by power of attorney

06/21/2021

** 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.