FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

asilington, D.C. 20049		

washington, b.c. 20043	
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	C

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

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response:	0.5								

Name and Address of Reporting Person* Phung Trinh						2. Issuer Name and Ticker or Trading Symbol Shockwave Medical, Inc. [SWAV]								(Ch	eck all appli Directo	cable)	g Pers	son(s) to Iss 10% Ov Other (s	vner	
(Last)	`	rst) MEDICAL, IN	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/29/2023									below)		inanc	below)	респу	
5403 BETSY ROSS DRIVE					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) SANTA	CLARA C	A !	95054														iled by Mor	•	n One Repo	I
(City)	(Si	tate)	(Zip)		Rı	Rule 10b5-1(c) Transaction Indication									440					
						satisfy	the a	ffirmative	e defe	ense cor	nditio	ns of Rule 1	10b5-1(c). See	Instruction	n 10.	on or written	pian ii	nat is intende	u to
		Tab	le I - Nor	n-Deriv	ative	Sec	uriti	ies Ac	qui	ired, I	Disp	osed c	of, or	Ben	eficial	y Owned	k			
Date					Day/Year) if a		A. Deemed Execution Date, f any Month/Day/Year)		, T			Disposed	Securities Acquired (A) posed Of (D) (Instr. 3, 4			5. Amou Securiti Benefici Owned I Reporte	es Formially (D) (Following (I) (II)		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										Code	v	Amount	() ()	A) or D)	Price	Transac (Instr. 3	ction(s)			,iiisu. 4)
Common Stock 08/2					9/2023	/2023				M		5,000	O A \$3		\$3.41	16 25,986			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 (Month/Day/Year) 3. Transaction Date Execution Date, if any (Month/Day/Year)			Date,		ransaction of ode (Instr. Derivative			Expi	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative S (Instr. 3 and					8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exer	e ercisable		xpiration ate	Title	N O	Amount or Number of Shares					
Stock Option	\$3.416	08/29/2023			M			5,000		(1)	0	7/12/2027	Comn		5,000	\$0.00	3,739		D	

Explanation of Responses:

1. Fully vested.

Remarks:

/s/ Wade Estey, as attorney-infact for Trinh Phung

08/31/2023

** 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.