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 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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

1. Name and Address of Reporting Person [*] Papiernik Antoine			2. Issuer Name and Ticker or Trading Symbol Shockwave Medical, Inc. [SWAV]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Papiernik	Antome		[X	Director	10% Owner			
			—	_	Officer (give title	Other (specify			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)		below)	below)			
C/O SHOCKWAVE MEDICAL, INC.			10/09/2020						
5403 BETSY	ROSS DRIVE	4							
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indi Line)	vidual or Joint/Group Fili	ing (Check Applicable			
SANTA				X	Form filed by One Re	porting Person			
CLARA	CA	95054			Form filed by More th Person	an One Reporting			
(City)	(State)	(Zip)	—						
	(Clutc)	(-14)		1					

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)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned 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	10/09/2020		s		1,126	D	\$79	1,483,080	I	By Sofinnova Capital VII FCPR ⁽¹⁾
Common Stock	10/12/2020		S		455	D	\$79	1,482,625	I	By Sofinnova Capital VII FCPR ⁽¹⁾
Common Stock								2,701	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. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of Deriv	r osed) 7. 3, 4	6. Date Exerc Expiration Da (Month/Day/N	iration Date Amount of nth/Day/Year) Securities Underlying Derivative		piration Date Amount of Security Security Underlying Derivative Security (Instr. 5) Owned Security (Instr. 5) Owned Security (Instr. 3) and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents shares directly held by Sofinnova Capital VII FCPR. The reporting person is one of the managing partners of Sofinnova Partners SAS, a French corporation and the management company of Sofinnova Capital VII FCPR. The reporting person disclaims beneficial ownership of the reported securities except to the extent of his pecuniary interest.

Remarks:

All transactions reported here were effected pursuant to a Rule 10b5-1 Plan adopted by Sofinnova Capital VII FCPR.

<u>/s/ Trinh Phung, as attorney-</u>	10/13/2020
in-fact for Antoine Papiernik	<u>10/15/2020</u>

Date ** Signature of Reporting Person

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.