FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington,	D.C.	20549	

on, D.C. 20549	OMB APPROVAL				
S IN RENEFICIAL OWNERSHIP	OMB Number:	3235-0			

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ck this box if no longer subject	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287
ection 16. Form 4 or Form 5 gations may continue. See ruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchan		Estimated average bu	rden
	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:	0.5
` '	or Section 30(h) of the Investment Company Act of 1940		

Name and Address of Reporting Person* Sainz Maria					2. Issuer Name and Ticker or Trading Symbol Shockwave Medical, Inc. [SWAV]								(Che	eck all app	licable) tor	ng Per	son(s) to Is	ner	
(Last) (First) (Middle) C/O SHOCKWAVE MEDICAL, INC. 5403 BETSY ROSS DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 09/08/2022										Officer (give title below)		Other (specify below)	
(Street) SANTA CLARA (City)	CA (Sta		5054 Zip)		4. If A								6. In Line) K Form Form	lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or E	3ene	ficial	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution		ution [Date,			es Acquired (A Of (D) (Instr. 3,			Benefic	ies ially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)	or P	rice	Transa	action(s) 3 and 4)			,iii3ti. 4)	
Common	Stock			09/08/2	2022		S		650	Г	\$	295 ⁽¹) 5	,316		D			
		Tal	ole II -								osed of, convertib				/ Owne	t			
1. Title of Derivative Security (Instr. 3)	perivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		str.	s. Price of Derivative Security Instr. 5)	tive derivative ty Securities	Owners Form: Direct (or Indirect) (I) (Insti	Ownership	Beneficial Ownership ct (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amor or Numi of Share	ber					

Explanation of Responses:

1. All reported securities were sold at a price of \$295.00.

Remarks:

/s/ Wade Estey, as attorney-in-

09/09/2022

fact for Maria Sainz

** 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.