FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*     Zacharias Isaac				2. Issuer Name <b>and</b> Ticker or Trading Symbol Shockwave Medical, Inc. [ SWAV ]										tionship of Reporting all applicable) Director Officer (give title			10% Ov	vner	
(Last)	(Fir	est) (MEDICAL, IN	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 06/26/2023								belov			Other (s below)	вреспу
5403 BETSY ROSS DRIVE				4. If Amendment, Date of Original Filed (Month/Day/Year)									<ol> <li>Individual or Joint/Group Filing (Check Applicable Line)</li> <li>X Form filed by One Reporting Person</li> </ol>						
(Street) SANTA CLARA	ANTA CA 95054		4										Form filed by More than One Reporting Person					- 1	
(City)	(St	ate) (Z	Zip)		  □ c	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											ended to		
		Table	I - N	Ion-Deriva	tive S	ecui	rities	Ac	quire	d, Di	sposed o	f, or E	Benefic	ially	/ Owr	ned			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				ear) Execution		on Date,		3. Transaction Code (Instr. 8)  4. Securitie Disposed 0		4. Securities Disposed Of	s Acquired (A) of (D) (Instr. 3, 4		and 5) S		5. Amount of Securities Beneficially Owned Following		m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price			orted saction(s) r. 3 and 4)				
Common Stock 06/26/202					23				S <sup>(1)</sup>		4,000	D	\$291.8	1.84 <sup>(2)</sup>		60,678		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)	Execution Date,			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		te Exe ation I th/Day	/Year)	Deriv Secu	int of rities rlying ative	Deri Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V (A) (D)		Date Exercisable		Expiration Date	Title Shares									

## Explanation of Responses:

- 1. All transactions reported here were effected pursuant to a Rule 10b5-1 Plan adopted by the reporting person on 2/25/2022, amended on 5/23/2022.
- 2. All reported securities were sold at a price of \$291.84.

## Remarks:

/s/ Wade Estey, as attorney in fact for Isaac Zacharias

06/26/2023

\*\* 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.