FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

MENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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 and Ticker or Trading Symbol ShockWave Medical, Inc. [SWAV]									all appli Directo	onship of Reporting all applicable) Director Officer (give title		Person(s) to Issuer 10% Owner Other (specify	
(Last) C/O SHO 5403 BE	12/	/10/20)19			`	th/Day/Year)		X										
(Street) SANTA CLARA CA 95054						4. If Amendment, Date of Original Filed (Month/Day/Year)									fividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Si		(Zip)		<u> </u>							<u> </u>							
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/N					ion	2A. D Execu	eeme	d	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an				5. Amor Securiti Benefic Owned	unt of ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount (A) or (D) Price		Price		Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)
Common Stock 12/10/2					019	19			M ⁽¹⁾		4,000	A	\$4.0	26	9,	,000		D	
Common Stock 12/10					019)19					1,911	D	\$39.84	04(2)	7,	,089		D	
Common Stock 12/					019				S		2,089	D	\$40.61	49 ⁽³⁾	5,	5,000		D	
		Т	able								sposed of, , converti				wned			,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed tion Date, n/Day/Year)	4. Transa Code (8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y 1	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	isable	Expiration Date	Title	Amour or Number of Shares	er					
Employee Stock Option (Right to	\$4.026	12/10/2019			M			4,000	(4))	04/10/2028	Commor Stock	4,000	0	\$0	135,540		D	

Explanation of Responses:

- 1. All transactions reported here were effected pursuant to a Rule 10b5-1 Plan adopted by the reporting person on 9/4/2019.
- 2. The price reported in Column 4 is a weighted average price. The reported securities were sold in multiple transactions at prices ranging from \$39.33 to \$40.27. The reporting person undertakes to provide to the issuer, any security holder of the issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within such range.
- 3. The price reported in Column 4 is a weighted average price. The reported securities were sold in multiple transactions at prices ranging from \$40.33 to \$41.07. The reporting person undertakes to provide to the issuer, any security holder of the issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within such range.
- 4. Twenty-Five percent of the shares subject to the option vested on 3/1/19 and the balance of the shares are scheduled to vest in equal monthly installments thereafter for 36 months.

/s/ Trinh Phung, as attorney in fact for Isaac Zacharias

** Signature of Reporting Person Date

12/12/2019

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.