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

Washin

gton, D.C. 20549	OMB APF	OMB APPROVAL				
S IN RENEEICIAL OWNEDSHID	OMB Number:	3235				

STATEMENT	OF	CHANGES	IN

-0287 Estimated average burden hours per response: 0.5

Instruc	tion 1(b).			Filed							ies Exchang mpany Act o		f 1934			lilouis	PCI 10	эропос.	0.5
Name and Address of Reporting Person* Zacharias Isaac				2. Issuer Name and Ticker or Trading Symbol Shockwave Medical, Inc. [SWAV]										k all app Direc	iship of Reporting applicable) irector		10% Ov	vner	
(Last)	(Fir	rst) (I MEDICAL, IN	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/05/2024									X	Officer (give title below) Presiden		Other (spec below) nt, CCO		specify
5403 BETSY ROSS DRIVE				4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)	,					
(Street) SANTA CLARA	CA	A 9	05054											X		filed by Mo		in One Repo	
(City)	(Sta	ate) (2	Zip)		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.									nded to					
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	uired	, Dis	posed of	, or B	enefi	cially	/ Own	ed			
Date			2. Transact Date (Month/Day	y/Year) if any		eemed ution Date, ' th/Day/Year)				Disposed Of	ies Acquired (A) Of (D) (Instr. 3,		4 and Secu Bene Own		cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	r Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Common Stock 02			02/05/2	024				F		2,339	D	\$22	26.28 70		70,976		D	
Common Stock 02/0			02/05/2	024				F		1,463	D	\$22	26.31	69	69,513		D		
Common	nmon Stock 02/05/2		024				F		234	D	\$22	26.29	6.29 69,279			D			
		Та	ble II ·								osed of, c				Owned	k			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Security or Exercise (Month/Day/Year) Execution Date,		4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr	rities ired rosed : 3, 4			ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)						10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amour or Number of Shares	r					

Explanation of Responses:

Remarks:

/s/ Wade Estey, as attorney-in-02/06/2024 fact for Isaac Zacharias

** 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.

POWER OF ATTORNEY

Know all by these presents, that the undersigned hereby constitutes and appoints each of Douglas Godshall, Trinh Phung, Hajime Tada, Wade Estey and Kendra Fox as the undersigned's true and lawful attorneys-in-fact to:

- (1) execute for and on behalf of the undersigned, in the undersigned's capacity as a reporting person pursuant to Section 16 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), and the rules thereunder of Shockwave Medical, Inc. (the "Company"), Forms 3, 4 and 5 in accordance with Section 16(a) of the Exchange Act;
- do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Form 3, 4 or 5 and timely file such form with the United States Securities and Exchange Commission and stock exchange or similar authority; and
- take any other action of any type whatsoever in connection with the foregoing which, in the opinion of any of such attorneys-in-fact, may be of benefit to, in the best interest of, or legally required by, the undersigned, it being understood that the documents executed by any of such attorneys-in-fact on behalf of the undersigned pursuant to this Power of Attorney shall be in such form and shall contain such terms and conditions as any of such attorneys-in-fact may approve in the discretion of any of such attorneys-in-fact.

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary, or proper to be done in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as the undersigned might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that any of such attorneys-in-fact, or the substitute or substitutes of any of such attorneys-in-fact, shall lawfully do or cause to be done by virtue of this Power of Attorney and the rights and powers herein granted. The undersigned acknowledges that the foregoing attorneys-in-fact, in serving in such capacity at the request of the undersigned, are not assuming, nor is the Company assuming, any of the undersigned's responsibilities to comply with Section 16 of the Exchange Act.

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4 and 5 with respect to the undersigned's holdings of and transactions in securities issued by the Company, unless earlier revoked by the undersigned in a signed writing delivered to the foregoing attorneys-in-fact.

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 5th day of February 2024.

Signature: /s/ Isaac Zacharias
Print Name: Isaac Zacharias