The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

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				OMB APPROVAL
UNI	TED STATES SECURITIES Washingto	5 AND EXCHAN on, D.C. 20549	GE COMMISSION	OMB 3235-
		DRM D		Number: 0076
	Notice of Exempt		rities	Estimated average burden
	Touce of Exempt	Shering of been		hours per 4.00
				response: 4.00
1. Issuer's Identity				
CIK (Filer ID Nun	nber) Previous Names	X None		Entity Type
0001642545			X Corporation	on
Name of Issue	r		Limited P	
ShockWave Medical, Inc.			Limited L	iability Company
Jurisdiction of			General P	-
Incorporation/Organ	nization		Business	
DELAWARE Year of Incorporat	tion/Organization		Other (Sp	ecify)
_				
X Over Five Years Ago Within Last Five Years (S	necify Vear)			
Yet to Be Formed	pecity redij			
2. Principal Place of Business	s and Contact Information			
Name o	of Issuer			
ShockWave Medical, Inc.				
	Address 1	_	Street Address 2	
5403 BETSY ROSS DRIVE		STE. 108		
City	State/Province/Country			nber of Issuer
SANTA CLARA	CALIFORNIA	95054	510-279-426	02
3. Related Persons				
Last Name	Firs	st Name	Middle N	ame
Godshall	Douglas			
Street Address 1	-	Address 2		
5403 Betsy Ross Drive				
City	State/Prov	vince/Country	ZIP/Postal	Code
Santa Clara	CALIFORNIA		95054	
Relationship: X Executive 0	Officer X Director Promot	er		
Clarification of Response (if	Necessary):			
Last Name	Fire	st Name	Middle N	ame
Puckett	Dan		Windult 1	
Street Address 1		Address 2		
5403 Betsy Ross Drive				
City	State/Prov	vince/Country	ZIP/Postal	Code
Santa Clara	CALIFORNIA		95054	

Clarification of Response (if Necessary):

Relationship: X Executive Officer Director Promoter

Last Name	First Name	Middle Name
Zacharias Street Address 1	Isaac Street Address 2	
5403 Betsy Ross Drive	Street Address 2	
City	State/Province/Country	ZIP/PostalCode
Santa Clara	CALIFORNIA	95054
Relationship: X Executive Officer	Director Promoter	
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Moll	Frederic	Witter Paine
Street Address 1	Street Address 2	
5403 Betsy Ross Drive		
City	State/Province/Country	ZIP/PostalCode
Santa Clara	CALIFORNIA	95054
Relationship: Executive Officer X	Director Promoter	
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Watkins	Jay	
Street Address 1	Street Address 2	
5403 Betsy Ross Drive		
City	State/Province/Country	ZIP/PostalCode
Santa Clara	CALIFORNIA	95054
Relationship: Executive Officer X	C Director Promoter	
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Cahill	Colin	
Street Address 1	Street Address 2	
5403 Betsy Ross Drive		
City	State/Province/Country	ZIP/PostalCode
Santa Clara	CALIFORNIA	95054
Relationship: Executive Officer X	C Director Promoter	
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Papiernik	Antoine	
Street Address 1	Street Address 2	
5403 Betsy Ross Drive		
City	State/Province/Country	ZIP/PostalCode
Santa Clara	CALIFORNIA	95054
Relationship: Executive Officer X	L Director Promoter	
Clarification of Response (if Necessa	гу):	
Last Name	First Name	Middle Name
Francis	Laura	
Street Address 1	Street Address 2	
5403 Betsy Ross Drive		
City	State/Province/Country	ZIP/PostalCode
Santa Clara	CALIFORNIA	95054

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name		First Name	Middle Name
Larkin		Raymond	
Stree	et Address 1	Street Address 2	
5403 Betsy Ros	ss Drive		
	City	State/Province/Country	ZIP/PostalCode
Santa Clara		CALIFORNIA	95054
Relationship:	Executive Office	r X Director Promoter	

Clarification of Response (if Necessary):

4. Industry Group

Agriculture Banking & Financia Commercial Bank Insurance Investing Investment Bankin Pooled Investment Is the issuer regist an investment con the Investment Con Act of 1940?	sing ng t Fund tered as npany under ompany	Health Care Biotechnology Health Insurance Hospitals & Physicians Pharmaceuticals X Other Health Care Manufacturing Real Estate Commercial Construction	Retailing Restaurants Technology Computers Telecommunications Other Technology Travel Airlines & Airports Lodging & Conventions
Yes No Other Banking & Financial Services Business Services Energy Coal Mining Electric Utilities Energy Conservation Environmental Services Oil & Gas		REITS & Finance Residential Other Real Estate	Tourism & Travel Services Other Travel Other
Other Energy			

5. Issuer Size

Revenue Range	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
X Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Rule 504(b)(1) (not (i), (ii) or (iii))

Investment Company Act Section 3(c)

Rule 504 (b)(1)(i)	Section 3(c)	1) Section 3(c)(9)	
Rule 504 (b)(1)(ii)	Section 3(c)(2	2) Section 3(c)(10)	
Rule 504 (b)(1)(iii) X Rule 506(b)	Section 3(c)	3) Section 3(c)(11)	
Rule 506(c)	Section 3(c)(4	4) Section 3(c)(12)	
Securities Act Section 4(a)(5)	Section 3(c)(5) Section 3(c)(13)	
	Section 3(c)(6) Section 3(c)(14)	
	Section 3(c)(7	⁽)	
7. Type of Filing			
X New Notice Date of First Sale 2019-03-11 Amendment	First Sale Yet to C	Dccur	
8. Duration of Offering			
Does the Issuer intend this offering to last more	than one year?	Yes X No	
9. Type(s) of Securities Offered (select all that a	oply)		
X Equity		Pooled Investment Fund Interests	
Debt Option, Warrant or Other Right to Acquire A	nother Security	Tenant-in-Common Securities Mineral Property Securities	
Security to be Acquired Upon Exercise of Op Other Right to Acquire Security	5	Other (describe)	
10. Business Combination Transaction			
Is this offering being made in connection with a a merger, acquisition or exchange offer?	business combinati	ion transaction, such as Yes X No	
Clarification of Response (if Necessary):			
11. Minimum Investment			
Minimum investment accepted from any outside	e investor \$0 USD		
12. Sales Compensation			
Recipient	Recipie	ent CRD Number X None	
(Associated) Broker or Dealer X None	(Assoc	iated) Broker or Dealer CRD Number λ	X None
Street Address 1	State /Da	Street Address 2	71D/De etcl Ce de
City State(s) of Solicitation (select all that apply)		rovince/Country	ZIP/Postal Code
Check "All States" or check individual States	All Crates Ears:	gn/non-US	
Check All States of Check mutvituda States	All States Forei	giriioii-05	
13. Offering and Sales Amounts	All States Forei	gii/iioii-03	
13. Offering and Sales AmountsTotal Offering Amount\$10,000,000 USD		gii/101-03	
13. Offering and Sales AmountsTotal Offering Amount\$10,000,000 USDTotal Amount Sold\$9,999,995 USD	or Indefinite	gii/1011-03	
13. Offering and Sales AmountsTotal Offering Amount\$10,000,000 USD	or Indefinite	gii/11011-03	
13. Offering and Sales AmountsTotal Offering Amount\$10,000,000 USDTotal Amount Sold\$9,999,995 USD	or Indefinite	gii/iioii-03	
13. Offering and Sales AmountsTotal Offering Amount\$10,000,000 USDTotal Amount Sold\$9,999,995 USDTotal Remaining to be Sold\$5 USD	or Indefinite		

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

1

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$0 USD	Estimate
Finders' Fees	\$0 USD	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
ShockWave Medical, Inc.	/s/ Douglas Godshall	Douglas Godshall	President and CEO	2019-03-18

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.