#### FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL						
	OMB Number:	3235-0287						
l	Estimated average burden							
l	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

1. Name and Address of Reporting Person*  DUNN JEFFREY W					2. Issuer Name <b>and</b> Ticker or Trading Symbol SI-BONE, Inc. [ SIBN ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)						
													X Dire		ctor	10%	Owner		
(Last)	(Fil	rst) (I	Middle)	)		Date of Earliest Transaction (Month/Day/Year)							$\overline{}$	X	Offic belov	er (give title v)	Other below	(specify y)	
C/O SI-BONE, INC.					08/	08/16/2019								Chairman, President & CEO					
471 EL CAMINO REAL, SUITE 101																			
						4. If Amendment, Date of Original Filed (Month/Day/Year)							6	6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line)					
SANTA (	CLARA CA	<b>\</b> 9	5050											X	X Form filed by One Reporting Person				
				-										Form filed by More than One Reporting Person					
(City)	(St	ate) (2	Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of S	Security (Inst	r. 3)		2. Transacti	on	2A. Deemed 3. 4. Securities Acquired (A) or								5. Amount of			6. Ownership	7. Nature	
Date (Month/Day/Y			/Year)	ar) Execution Date, if any (Month/Day/Year)		/			(D) (Instr. 3, 4 and 5)		5)	Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership				
								Ī	Code	v	Amount	(A) or (D)	Price			rted action(s) 3 and 4)		(Instr. 4)	
Common Stock 08/16/201					019	.9		S <sup>(1)</sup>		40,000	D	\$19.64	35 <sup>(2)</sup>	507,540		I	by Trust <sup>(3)</sup>		
Common Stock														99,9		9,997(4)	D		
		Та	ble II								oosed of,				vned				
				(e.g., p	uts, c	alls,	warr	ants	, opti	ions,	convertib	le sec	urities)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu if any	eemed Ition Date, h/Day/Year)		ransaction of ode (Instr. Derivative				Expiration Date (Month/Day/Year)			and it of ties ying tive ty (Instr. 3			ive derivative Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	ode V (A) (D)		(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares						

### **Explanation of Responses:**

- 1. The sale reported on this Form 4 was effected pursuant to a 10b5-1 trading plan.
- 2. The price reported in column 4 is a weighted-average price. The shares were sold in multiple transactions ranging from \$19.00 to \$20.00, inclusive. The Reporting Person undertakes to provide 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 the range set forth in
- 3. Shares held by The Jeffrey W. Dunn Living Trust Dated May 17, 2012.
- 4. Includes 92,920 shares issuable on settlement of restricted stock units granted to the Reporting Person. Each restricted stock unit represents a contingent right to receive on shares of the Issuer's common

#### Remarks:

/s/ Michael A. Pisetsky, Attorney-in-Fact for Jeffrey W. 08/19/2019 **Dunn** 

\*\* 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.