## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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neck this box if no longer subject to ection 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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

1. Name and Address of Reporting Person*  DUNN JEFFREY W						2. Issuer Name <b>and</b> Ticker or Trading Symbol SI-BONE, Inc. [ SIBN ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last)	(Fi		Middle)		- 3 D	Date of Earliest Transaction (Month/Day/Year)								X X	Offic belov	cer (give title Of		10% C Other below)	(specify
C/O SI-BONE, INC. 471 EL CAMINO REAL, SUITE 101					01/15/2020									Ch	Chairman, President & CE			)	
(Street) SANTA CLARA CA 95050				- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
(City)			Zip)		-										rm filed by More than One Reporting rson				
		Tabl	e I - No	on-Deri	/ative	Sec	uritie	s Ac	quirec	l, Di	sposed o	f, or E	Benefi	cially	Owne	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day					Execu y/Year) if any		Deemed ecution Date, ny onth/Day/Year)		3. 4. Securitie Transaction Code (Instr. 8)				and 5) Secui Bene		icially d Following	6. Owner Form: D (D) or Ir (I) (Insti	irect direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) o (D)	Price		Trans	action(s) 3 and 4)			(1130.4)
Common Stock 01/15/				2020	020			S <sup>(1)</sup>		1,743	D	\$21	.3103	23	5,804(2)	Ι	)		
Common	Stock													407,540 <sup>(3)</sup> I by					by Trust
		Та	ble II -								osed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Der Sec (Ins	rice of ivative curity etr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forn Dire or In (I) (II	ership n: ct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Î	Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amour or Numbe of Shares						

## **Explanation of Responses:**

- 1. The sale reported on this Form 4 represents shares required to be sold by the Reporting Person to cover tax withholding obligations in connection with the vesting of restricted stock units. The sale satisfies the tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary trade by the Reporting Person.
- 2. Includes 212,541 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
- 3. Shares held by The Jeffrey W. Dunn Living Trust Dated May 17, 2012.

## Remarks:

/s/ Michael A. Pisetsky, Attorney-in-Fact for Jeffrey W. 01/17/2020 **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.