## SEC Form 4

# FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

# OMB APPROVAL OMB Number: 3235-0287 Estimated average burder hours per response: 0.5

1 Name and Address of						
1. Name and Address of Reporting Person <sup>*</sup> FRANCIS LAURA			2. Issuer Name and Ticker or Trading Symbol <u>SI-BONE, Inc.</u> [ SIBN ]		tionship of Reporting Perso all applicable) Director	n(s) to Issuer 10% Owner
(Last) (First) (Middle) C/O SI-BONE, INC.			3. Date of Earliest Transaction (Month/Day/Year) 01/15/2019	X	Officer (give title below) Chief Financial C	Other (specify below) fficer
471 EL CAMINO REAL, SUITE 101						
(Street) SANTA CLARA C 	CA State)	95050 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi Line) X	idual or Joint/Group Filing ( Form filed by One Report Form filed by More than 0 Person	ting Person

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock	01/15/2019		Α		22,800 <sup>(1)</sup>	Α	\$0.00	71,018	D		

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to buy)	\$22	01/15/2019		A		49,400		(2)	01/15/2029	Common Stock	49,400	\$0.00	49,400	D	

#### Explanation of Responses:

1. Reflects shares issuable on settlement of restricted stock units granted to the Reporting Person. Each restricted stock unit represents a contingent right to receive one shares of the Issuer's common stock. The shares subject to the restricted stock unit vest in equal quarterly installments over four years commencing on January 15, 2019, subject to the Reporting Person's continued service through each relevant vesting date.

2. The shares subject to the option vest in equal monthly installments over four years commencing on January 15, 2019, subject to Reporting Person's continued service through each relevant vesting date.

/s/ Michael A. Pisetsky, <u>Attorney-in-Fact for Laura A.</u> 01/17/2019 <u>Francis</u> \*\* 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.