FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per respons	e: 0.5								

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

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

Name and Address of Reporting Person* Valentine Keith			2. Issuer Name and Ticker or Trading Symbol SI-BONE, Inc. [SIBN] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							suer									
<u>valentine Keitii</u>									_				X	Direc	tor		10% Ov	vner	
(Last) (First) (Middle) C/O SI-BONE, INC.			3. Date of Earliest Transaction (Month/Day/Year) 06/16/2022					-	Office below	er (give title		Other (s below)	specify						
471 EL CAMINO REAL, SUITE 101			4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable																
(Street) SANTA CLARA	CA	9	5050		4. 11 7	Amena	ment,	Date 0	Oligilia	ai riied	з (МОПШИДА	y/ real)	Line)	Form	filed by On	e Repor	ting Perso	on
(City)	(Sta	ate) (Z	ľip)																
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficiall	y Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Execution Date,		3. 4. Securities Acquired Disposed Of (D) (Instr. 8) 5,		iired (/ nstr. 3	A) or 3, 4 and	5. Amo Securit Benefic Owned Report	ies ially Following	6. Own Form: I (D) or I (I) (Inst	Direct ndirect tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
								Code	v	Amount	(A) (D)	or F	Price	Transa	action(s) 3 and 4)			(III3ti. 4)	
Common Stock 06/16/2				2022				A		8,324(1)	A		\$0.00	52,	,343(2)	I)		
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)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		ion Date,		ransaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	y Di or (I)). wnership orm: irect (D) r Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
		Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Share	ber								

Explanation of Responses:

- 1. Reflects shares issuable on the settlement of restricted stock units granted to the Reporting Person. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock. The shares subject to the restricted stock unit will vest 100% upon the earlier of (i) the next annual general meeting of the stockholders of the Company or (ii) the date one year from the Vesting Commencement Date, subject to the Reporting Person's continuous service as a member of the Company's Board of Directors until such date.
- 2. Includes 8,324 shares issuable on the settlement of restricted stock units granted to the Reporting Person. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.

Remarks:

/s/ Michael A. Pisetsky,
Attorney-in-Fact for Keith C. 06/20/2022

Valentine

** 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.