FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
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Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1/h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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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)							
DONN JEFFRET W												X	Direc	tor		10% O	wner		
(Last)	(Fir	st) (N	(Middle)				Date of Earliest Transaction (Month/Day/Year)							X	Office below	er (give title /)		Other (s	specify
C/O SI-BONE, INC.				11/16/2020									Chairman, President & CEO						
471 EL CAMINO REAL, SUITE 101																			
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
SANTA	CA		5050											X Form filed by One Reporting Person					
CLARA	C A	1 9 	3030											Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	<u>′</u> ip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/N				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (AD Disposed Of (D) (Instr. 3D)				Securities I Beneficially ( Owned Following (		Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership					
								Code V		Amount	(A) or (D)	Price			erted saction(s) : 3 and 4)			(Instr. 4)	
Common Stock 11/16/20				20		<b>S</b> <sup>(1)</sup>		4,493	D	\$23.8	8189	189 217,878(2)(3)			D				
Common Stock														19	5,940			by Trust <sup>(4)</sup>	
		Tal	ole II								osed of,				Owne	d	,	,	
				(e.g., pu	its, ca	alis, v	varra	ants,	, optic	ons,	convertib	ie sec	uritie	(S)					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	eemed ution Date, th/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date		ate	7. Title Amour Securi Under Deriva Securi 3 and	nt of ties lying tive ty (Instr	Der Sec (Ins	Price of ivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares	r					

- 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 155,931 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
- 3. Includes 1,441 shares acquired under the SI-BONE, Inc. 2018 Employee Stock Purchase Plan on November 13, 2020
- 4. Shares held by The Jeffrey W. Dunn Living Trust Dated May 17, 2012.

## Remarks:

/s/ Michael A. Pisetsky,

Attorney-in-Fact for Jeffrey 11/18/2020

W. Dunn

\*\* Signature of Reporting Person

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.