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

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5 Deletionship of Departing Person(s) to Jesuer

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

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1. Name ar		SI-BONE, Inc. [SIBN]									all appli Directo	cable)	y reis	10% Ov Other (s	vner				
(Last) (First) (Middle) C/O SI-BONE, INC.						3. Date of Earliest Transaction (Month/Day/Year) 09/14/2020								X Office (give title Officer (specify below) Chief Financial Officer					
471 EL C	4 1	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable								
(Street) SANTA CLARA CA 95050					_									X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execu	eemed ution Date, / th/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an		(A) or . 3, 4 and	Benefic		es ially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Price		Transaction (Instr. 3 and				(Instr. 4)	
Common Stock 09/14/202						20			M		2,547	A	\$4.	32	13'	137,808		D	
Common Stock 09/14/202					020	20			S ⁽¹⁾		2,547	D	\$23.0	3.0183(2) 1		35,261 ⁽³⁾		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)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	у	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	ber					
Stock Option (Right to Buy)	\$4.32	09/14/2020			М			2,547	(4)		05/25/2025	Common	2,54	17	\$0.00	122,392	2	D	

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 \$23.00 to \$23.06, inclusive. The Reporting Person undertakes to provide the Issuer, any securityholder 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. Includes 80,080 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
- 4. The shares subject to the option vest in equal monthly installments over four years commencing on vesting commencement date, subject to Reporting Person's continued service through each relevant vesting date.

Remarks:

/s/ Michael A. Pisetsky, 09/16/2020 Attorney-in-Fact for Laura A. <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.