FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0287									
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hours per response:	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

1. Name and Address of Reporting Person* Reckling W Carlton						2. Issuer Name and Ticker or Trading Symbol SI-BONE, Inc. [SIBN]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) C/O SI-E	(FI	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/15/2020								X	Office	er (give title	Medic	Other (specify below)		
471 EL CAMINO REAL, SUITE 101						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SANTA CLARA CA 95050 (City) (State) (Zip)					_									X	Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y						Exec if an	у	ed Date, y/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			nd 5) Secur Benef Owne		icially d Following	Form:	nership Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Price			ted action(s) 3 and 4)			(Instr. 4)		
Common Stock 01/15/202						20		М		5,000	A	\$3.9	96		9,170]	D			
Common Stock 01/15/202					020	20		S ⁽¹⁾		5,000	D	\$21.21	2164(2)		1,170 ⁽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)	if any	emed ion Date, /Day/Year)	4. Transac Code (Ir 8)				6. Date Exerci Expiration Dat (Month/Day/Yo		te	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		of Deri Sec	rice vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	wnership orm: rect (D) Indirect	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal	able	Expiration Date	o N	Amoun or Numbe of Shares							
Stock Option (Right to Buy)	\$3.96	01/15/2020			М			5,000	(4)		03/18/2023	Common Stock	5,000	\$(0.00	20,554		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 \$21.00 to \$21.57, inclusive.
- 3. Includes 40,080 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 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. Attorney-in-Fact for W. Carlton 01/17/2020 Reckling

** 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.