SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
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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 Add <u>Vazquez Ma</u>	ress of Reporting P artin	Person*		2. Issuer Name and Ti Outset Medical				all applicable) Director	11 ,			
(Last) 3052 ORCHA	(First) RD DRIVE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/01/2023						Officer (give title Other (specify below) below) Chief Operating Officer			
(Street)			4. If Amendment, Date	of Original F	iled (Month/Da	6. Individual or Joint/Group Filing (Check Applicable Line)						
SAN JOSE	СА	95134							X	Form filed by One Form filed by Mor Person		
(City)	(State)	(Zip)										
		Table I - N	lon-Deriva	tive Securities A	cquired, [Disposed o	f, or B	Benefi	cially	Owned		
Date			2. Transaction Date (Month/Day/Ye	Execution Date,	3. Transaction Code (Instr. 8)				d 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 (Instr. 4)

		(wonth/Day/rear)	P)					Reported	(I) (IIISU. 4)	(Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	03/01/2023		М		5,000	Α	\$3.88	108,112	D	
Common Stock	03/01/2023		S ⁽¹⁾		5,000	D	\$ 22.3301 ⁽²⁾	103,112(3)	D	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Derivative Conversion Date Exercise (Month/Day/Year) if an		3A. Deemed Execution Date, if any	4. Transaction Code (Instr.		5. Number of Derivative		6. Date Exerc Expiration Da (Month/Day/)	ate	7. Title and Amount of Securities		8. Price of Derivative Security	derivative Securities	10. Ownership Form:	11. Nature of Indirect Beneficial	
			(Month/Day/Year)	8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				Underlying Derivative Security (Instr. 3 and 4)		(Instr. 5)	Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Performance Options (right to buy)	\$3.88	03/01/2023		М			5,000	(4)	12/19/2027	Common Stock	5,000	\$0.0	43,507	D	

Explanation of Responses:

1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 1, 2022.

2. The price reported in Column 4 is a weighted average price. The shares of common stock of the Issuer were sold in multiple transactions at prices ranging from: \$21.00 - \$21.99 - 362 shares; \$22.00 - \$22.99 - 4,637 shares; \$23.00 - \$23.99 - 1 share. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold within the range set forth in this footnote.

3. Includes 608 shares of Common Stock acquired pursuant to the Outset Medical, Inc. 2020 Employee Stock Purchase Plan ("ESPP"), for the purchase period of September 1, 2022 to February 28, 2023. This transaction is exempt from Rule 16b-3(c).

4. In March 2021, following the expiration of the lock-up period in connection with our initial public offering, the applicable performance and market-based vesting conditions were met and the shares underlying this stock option award became fully vested.

<u>By: John L Brottem For:</u> <u>Martin Vazquez</u> 0

03/02/2023

** 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.