FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Vashington,	D.C. 20549
-------------	------------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average b	urden								
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).

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*  GROSSMAN D KEITH				2. Issuer Name <b>and</b> Ticker or Trading Symbol Outset Medical, Inc. [ OM ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
UROSSMAN D KEITH					3 D									X Director Officer (give title			10% Owner Other (specify		specify			
(Last) 3052 ORC	Last) (First) (Middle) 052 ORCHARD DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 09/17/2020									below)			below)				
(Street)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)								
SAN JOS													X		-	ne Reporting Persor ore than One Repor		I				
(City)	(Sta	ate) (2	(Zip)													Person						
		Tab	le I - No	n-Deriv	ative	Sec	uriti	ies Acc	quired,	Dis	posed of	f, or Bei	nefici	ally	Owned							
, , , , , , , , , , , , , , , , , , ,		2. Transa Date (Month/D		/Year)   Exec		med on Date, Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
									v	Amount	(A) or (D)	Price	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Common Stock		09/17/2020		)			С		10,257	A	(2)	)(3)	11,604		<b>I</b> (1)		Held by The D. Keith and Hallie H. Grossman Family Living Trust <sup>(1)</sup>					
		Т									osed of,				wned							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year) if a	3A. Deeme Execution if any	A. Deemed xecution Date, any		4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercis Expiration Date (Month/Day/Yes		e Amount of			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amou or Numb of Share	oer								
Series C Redeemable Convertible Preferred Stock	(2)	09/17/2020			С			38,588	(2)		(2)	Common Stock	4,88	35	\$0	0		I <sup>(1)</sup>	Held by The D. Keith and Hallie H. Grossman Family Living Trust <sup>(1)</sup>			
Series D Redeemable Convertible Preferred Stock	(3)	09/17/2020			С			32,155	(3)		(3)	Common Stock	5,37	72	\$0	0		I <sup>(1)</sup>	Held by The D. Keith and Hallie H. Grossman Family Living Trust <sup>(1)</sup>			

## Explanation of Responses:

- 1. These shares of common stock of the Issuer ("Shares") are held directly by The D. Keith and Hallie H. Grossman Family Living Trust, for which the reporting person and his spouse serve as trustees.
- 2. The Series C redeemable convertible preferred stock automatically converted into Common Stock upon the closing of the IPO. Each share of Series C redeemable convertible preferred stock converted into approximately 0.1266 Shares. These shares had no expiration date.
- 3. The Series D redeemable convertible preferred stock automatically converted into Common Stock upon the closing of the IPO. Each share of Series D redeemable convertible preferred stock converted into approximately 0.1671 Shares. These shares had no expiration date.

/s/ LeeAnn Linck, attorney-in-

fact for Donald Keith

09/17/2020

Grossman

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.