## FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF C	HANGES	IN BEN	EFICIAL	OWNERS	HIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>Greenberg David C.</u>					2. Issuer Name and Ticker or Trading Symbol  ICU MEDICAL INC/DE [ ICUI ]								(Ch	neck all appl	ck all applicable)		ng Person(s) to Issuer 10% Owner		
(Last) 951 CAI	(F LLE AMAN	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/09/2018								Office below	r (give title )		Other ( below)	specify		
(Street) SAN CLEME			92673 (Zip)		4. If	Amer	ndmen	t, Date o	of Original	Filed	(Month/D	Day/Year)		6. I Lin	X Form	filed by On	e Rep	g (Check Aporting Person	on
		Tab	le I - Nor	n-Deriva	tive	Sec	curiti	es Ac	quired,	Dis	posed (	of, or E	Bene	ficial	lly Owne	d			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		r) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.					Benefic	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A)	or	Price	Transac (Instr. 3	ction(s)			(Instr. 4)
Common	Stock <sup>(1)</sup>			05/09/	2018				М		475	,	A	\$0.00	2) 2	,010		D	
Common	Stock															500		I	by Trust
		Т	able II - I	Derivati (e.g., pu					,			,		,	Owned				
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  Security  3. Transaction Date (Month/Day/Yea			3A. Deeme Execution if any (Month/Day	Date, Transaction			on of I		6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				c	ode	v	(A)		Date Exercisabl		xpiration ate	Title	or Nu of	nount imber ares					
Common	\$0.0 <sup>(2)</sup>	05/09/2018			M			475	05/09/201	B 05	5/09/2018	Commo	n Z	<b>1</b> 75	<b>\$0.0</b> <sup>(2)</sup>	0		D	

## **Explanation of Responses:**

- 1. These securities are Restricted Stock Units.
- 2. There is neither a purchase price nor an exercise price for the Restricted Stock Units.

By: Alejandro Parras, Attorney-In-Fact For: David C. 05/10/2018 Greenberg

\*\* 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.