## 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

**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 <b>and</b> Ticker or Trading Symbol  ICU MEDICAL INC/DE [ ICUI ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last) (First) (Middle) 951 CALLE AMANECER						3. Date of Earliest Transaction (Month/Day/Year) 05/15/2019										(give title		Other (s below)	
(Street) SAN CLEME					4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S		(Zip)		<u> </u>		•••					<u> </u>				•			
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D							2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (	3. Transaction Code (Instr. 5		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			5. Amou Securitie Benefici Owned F	nt of es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
										v	Amount (A) or (D)		or Pri	ice	Reported Transact (Instr. 3	tion(s)		1	Instr. 4)
Common Stock 05/15/							/2019				315	315 A		0.0	2,325			D	
Common Stock														500			I l	y Trust	
		٦	able II - I						uired, D s, option						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		of		6. Date Exercisal Expiration Date (Month/Day/Year			le and 7. Title ar Amount of Securities Underlyir Derivative (Instr. 3 a			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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amou or Numl of Share	ber					
Common Stock <sup>(1)</sup>	\$0.0 <sup>(2)</sup>	05/15/2019			M			315	(3)	05	5/15/2019	Commor Stock	31	5	\$0.0	0		D	
Common Stock <sup>(1)</sup>	\$0.0 <sup>(2)</sup>	05/15/2019			A		378		(3)	05	5/15/2020	Commor Stock	37	8	\$0.0	378		D	
Non- Qualified Stock Option (right to	\$225.27	05/15/2019			A		1,253		05/15/202	0 05	5/15/2029	Commor Stock	1,25	53	\$0.0	1,253		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.
- 3. These Restricted Stock Units vest on the anniversary of the date of the award.

By: Alejandro Parras, Attorney-In-Fact For: David C. 05/16/2019 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.