

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person* <u>Pardo Geoffrey B</u> (Last) (First) (Middle) <u>9201 W BROADWAY AVE</u> <u>#650</u> (Street) <u>MINNEAPOLIS MN 55445</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>CVRx, Inc. [CVRX]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>07/02/2021</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	07/02/2021		C		1,554,022	A	(1)	1,554,022	I	See Footnote ⁽²⁾
Common Stock	07/02/2021		P		275,000	A	\$18	1,829,022	I	See Footnote ⁽²⁾

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Series G Preferred Stock	(1)	07/02/2021		C		24,583,397		(3)	(3)	Common Stock	1,554,022	\$0	0	I	See Footnote ⁽²⁾

Explanation of Responses:

- Upon the closing of the Issuer's initial public offering, each share of Series G Convertible Preferred Stock automatically converted into shares of common stock at a rate of 1-for-0.0632143218.
- These shares are held directly by Cooperative Gilde Healthcare IV U.A. ("Gilde IV"). The Reporting Person is a partner of Gilde IV and may be deemed to share voting and dispositive over the shares held by Gilde IV. The Reporting Person disclaims beneficial ownership of all applicable shares except to the extent of his actual pecuniary interest in such shares.
- Upon the closing of the Issuer's initial public offering, each share of preferred stock automatically converted into shares of common stock at the then-applicable conversion rate for no additional consideration (subject to the payment of cash in lieu of any fractional shares). The conversion rates reported reflect the conversion ratios under the Issuer's certificate of incorporation, adjusted to give effect to the previously effected 1-for-39,548 reverse stock split of the common stock.

/s/ Amy C. Seidel, Attorney-in-Fact 07/02/2021

** 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.