Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	. OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average b	urden							
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*  Hawkinson Russ  (Last) (First) (Middle)  C/O SILVERBACK THERAPEUTICS, INC.  500 FAIRVIEW AVENUE N, SUITE 600					Issuer Name and Ticker or Trading Symbol     Silverback Therapeutics, Inc. [ SBTX ]  3. Date of Earliest Transaction (Month/Day/Year) 02/01/2022									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  Sr. Vice President of Finance					vner specify
(Street) SEATTL (City)	E W	WA 98109 (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person Person  ative Securities Acquired, Disposed of, or Beneficially Owned										n			
1. Title of Security (Instr. 3) 2. Trai			2. Trans Date	2. Transaction 2A. Deemed		3. 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)			ed (A) or	or 5. Amount of Securities Beneficially Owned Follow		s ally ollowing	Form: Di (D) or Inc		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)		. 11	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 02			02/01	/2022		A		7,500	7,500 <sup>(1)</sup> A \$		.00	8,954 <sup>(2)</sup>			D				
	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 I if any (Month/Day	Date,	ransaction		5. Number of		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		Der Sec	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amour or Number of Shares	er					
Stock Option (right to buy)	\$4.85	02/01/2022			A		45,000		(3)	0	1/31/2032	Common Stock	45,00	0 \$	\$0.00	45,000	)	D	
Stock Option (right to	\$4.85	02/01/2022			A		28,500		(4)	0	1/31/2032	Common Stock	28,50	0   \$	\$0.00	28,500	)	D	

## **Explanation of Responses:**

- 1. The shares being reported are being issued pursuant to restricted stock units, each one of which represents a contingent right to receive one share of the Issuer's common stock.
- 2. Includes 1,216 shares acquired under the Issuer's 2020 Employee Stock Purchase Plan on June 30, 2021.
- 3. The shares subject to the option vest in equal monthly installments over the 48 months following February 1, 2022.
- $4.\,25\% \ of the shares subject to the option vest on February 1, 2023, and the remaining shares will vest monthly thereafter over three years.$

## Remarks:

/s/ Jeffrey C. Pepe, Attorney-in-02/02/2022 **Fact** 

\*\* 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.