FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

or Section 30(h) of the Investment Company Act of 1940

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP 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

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response	: 0.5								

Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol CalciMedica, Inc. [CALC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Stauderman Kenneth A.				<u> </u>								Direc	or		10% Ow	ner		
					3. Di	Date of Earliest Transaction (Month/Day/Year)							X Office below	r (give title		Other (s below)	pecify	
(Last)	(F	irst)	(Middle)		05/0	08/2023							, Chief Scien	ntific	,			
CALCIN	MEDICA, II	NC.										_	Giner scientific street					
505 COA	AST S. BLV	D. #202			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)					Lin	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)															•		orting Perso	
LA JOLI	LA C	A	92037											Form Perso		e thai	n One Repo	rting
(City)	(S	tate)	(Zip)		Ru	Rule 10b5-1(c) Transaction Indication												
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transact		action										7. Nature of Indirect						
Date (Month/Da					Day/Yea	y/Year) if any			Code (Instr. 5)		su. 3, 4 an	Benefic	ially	(D) or Indirect I		Beneficial		
						(Month/Day/Year			r) 8)	8)					d		Ownership Instr. 4)	
									Code	V Amount		(A) o (D)	Price	Transa (Instr. 3				
Table II - Derivati						ecu	ırities	Aca	uired. Dis	no	sed of	or Ben	eficially	, Owned			1	
		-							s, options					,				
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	ion Date, Transaction of Code (Instr. Derivative		ive ies ed	6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)				f g s Security nd 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable	Ex Da	piration ate	Title	Amount or Number of Shares					
Employee Stock Option (Right to Buy)	\$3.25	05/08/2023			A		68,988		(1)	05	/07/2033	Common Stock	68,988	\$0.00	68,988	3	D	

Explanation of Responses:

1. 1/48th of the shares subject to the option vest in equal monthly installments over a four year period following the date of grant.

Remarks:

/s/John Dunn, Attorney-in-Fact 05/10/2023

** Signature of Reporting Person

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.