FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-028									
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0.5

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

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

1. Name and Address of Reporting Person* <u>Leheny A. Rachel</u>					2. Issuer Name and Ticker or Trading Symbol CalciMedica, Inc. [CALC]									S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner					
(Last) (First) (Middle) C/O CALCIMEDICA, INC.				Date of E /31/202		rans	saction	ı (Moı	nth/Day/Year)		X Officer (give title below) Other (some below) Chief Executive Officer					aify			
505 COAST S. BLVD. #202				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	LA CA	A 9	2037										X Form filed by One Reporting Person Form filed by More than One Reporting Person					ng	
(City)	(State) (Zip)			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-Deriva	tive	Secu	rities <i>F</i>	۱cq	uire	d, D	isposed o	f, or l	Benefic	ially Owi	ned					
Dat		2. Transaction Date (Month/Day/Yo	ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Ti	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a 5)			nd Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							c	Code V		Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)						
Common Stock 05/31/20			05/31/202	23				P		1,000	A	\$4.21(1	5,00	00	Г)			
Common Stock												356,9	356,989		,		lence ments V,		
Common Stock												66,2	228	I		By Val Investr SPV V LLC ⁽²⁾	ments 7,		
Common Stock												316,109		I		By Val Investr SPV V LLC ⁽²⁾	ments /I,		
		Tab	le II - Derivati (e.g., pu							posed of, , convertil				ed					
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any				Transaction Number Code (Instr. of			Expir	ation	ercisable and Date V/Year)	Secu Unde Deriv Secu	unt of rities rlying ative rity . 3 and 4)	8. Price of Derivative Security (Instr. 5)			10. Owners Form: Direct (or Indir (I) (Inst	ship of Be (D) Ov ect (In	Nature Indirect eneficial wnership nstr. 4)	
				Cod	Code V (A) (D)		D)	Date Exercisabl		Expiration e Date	Title	Amount or Number of Shares	1						

Explanation of Responses:

- 1. The weighted average purchase price for the transaction reported was \$4.21, and the range of prices were between \$4.00 and \$4.48. Upon request by the SEC staff, the Issuer, or any security holder of the Issuer, full information regarding the number of shares purchased at each separate price will be provided.
- 2. The Reporting Person, a co-founder and managing director of Valence Investments SPV IV, LLC ("Valence IV"), Valence Investments SPV V, LLC ("Valence V") and Valence Investments SPV VI, LLC ("Valence VI), may be deemed to beneficially own the securities held by Valence IV, Valence V and Valence VI (the "Valence Securities"). The Reporting Person disclaims beneficial ownership of the Valence Securities except to the extent of her pecuniary interest therein.

Remarks:

By John Dunn, Attorney-in-

06/01/2023

<u>Fact</u>

** 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.