FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

	nd Address of ON ROBE	Reporting Person*			<u>Ca</u>	alciN	<u> Medica</u>	<u>, Inc</u>	ker or Trading	]			(Che	elationship eck all applie X Directo	cable)	g Perso	on(s) to Issu 10% Ow Other (sp	ner
(Last)	(Fi	rst)					3. Date of Earliest Transaction (Month/Day/Year) 03/28/2024							below)			below)	Decily
C/O CALCIMEDICA, INC. 505 COAST BLVD. S. #307					4.1	If Amendment, Date of Original Filed (Month/Day/Year)							Line	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person				
(Street)  LA JOLI	LA CA	A	92037											Form f Persor		e than (	One Report	ing
(City)	(Si	tate)	(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 satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								t is intended	to				
		Tab	le I - Noi			_			quired, D	ispose	ed o	f, or Bei	neficiall	y Owned				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					ear) i	A. Deemed Execution Date, f any Month/Day/Year)		Code (Ins	Transaction Disposed (Code (Instr. 5)		ties Acquired (A) or d Of (D) (Instr. 3, 4 an			es ally following	Form: (D) or I	Form: Direct C D) or Indirect E I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code V	Amo	ount	(A) or (D)	Price	Reported Transact (Instr. 3	ction(s)			
	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. Deeme Execution if any (Month/Day	Date,	Code (Ir		5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (II 3, 4 and	ve es d d	6. Date Exercisable and Expiration Date (Month/Day/Year)		and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (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	Expirat Date	ition	Title	Amount or Number of Shares					
Director Stock Option (Right to Buy)	\$4.16	03/28/2024			Α		10,000		(1)	03/27/2	2034	Common Stock	10,000	\$0	10,000	)	D	

## Explanation of Responses:

1. 1/12th of the shares subject to the option vest in equal monthly installments over a one year period following the date of grant.

/s/ John Dunn, Attorney-in-Fact 04/22/2024

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.