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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
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(n) of the investment Company Act of 1940								
1. Name and Address of Reporting Person* Dunn Michael J.			2. Issuer Name <b>and</b> Ticker or Trading Symbol CalciMedica, Inc. [ CALC ]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Dulli Mich	<u>ldel J.</u>				Director	10% Owner					
(Last)	(Eirct)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	X	Officer (give title below)	Other (specify below)					
(Last) (First) (Middle) C/O CALCIMEDICA, INC.		(Middle)	05/08/2023		President and COO						
505 COAST S. BLVD. #202			4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Line)								
(Otras at)			—	X	Form filed by One Re	porting Person					
(Street) LA JOLLA	CA	92037			Form filed by More the Person	an One Reporting					
(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 satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								
		Table I - Non-De	rivative Securities Acquired, Disposed of, or Bene	ficially	Owned						

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (li 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		(1130.4)

	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. Transac Code (Ir 8)		of Derivati Securiti Acquire (A) or Dispose of (D)	Number f erivative ecurities cquired A) or isposed f (D) nstr. 3, 4		d 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				
Employee Stock Option (Right to Buy)	\$3.25	05/08/2023		A		55,190		(1)	05/07/2033	Common Stock	55,190	\$0.00	55,190	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 Date

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

 $\ast$  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.