FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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hours per response	: 0.5							

	Check this box if no longer subject
	to Section 16. Form 4 or Form 5
$\cup$	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

Name and Address of Reporting Person*     BJERKHOLT ERIC					2. Issuer Name <b>and</b> Ticker or Trading Symbol CalciMedica, Inc. [ CALC ]									(Chec	k all app	p of Reporti olicable)	ng Per	. ,		
					0.5.									X	Direc			10% O	- 1	
(Last)	(Fi	rst) (I	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 05/23/2023									er (give title v)		Other (s	specify	
C/O CALCIMEDICA, INC.					4. If Amendment, Date of Original Filed (Month/Day/Year)								r)	6. Individual or Joint/Group Filing (Check Applicable						
505 COAST S. BLVD, #202				- 1. Transminint, Date of Original Flied (World Day/Teal)								.,	Line)							
,															X Form filed by One Reporting Person					
(Street)	(Street) LA JOLLA CA 92037													Form filed by More than One Reporting Person						
LITTOLI		Rule 10b5-1(c) Transaction Indication																		
(City)	(C+	ata) (	-) (7:-)			Traile Tong-T(c) Hallsaction maleation														
(City)	(51	ate) (2	Zip)		Ch	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 - No	n-Deriva	tive S	ecui	rities	Acq	uired,	Dis	posed of	f, or l	Benef	iciall	y Owr	ned				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)				y/Year) Execu		Deemed cution Date, y nth/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A l Of (D) (Instr. 3,		3, 4 and Secu		cially 1	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) or (D)		се	Transa	ransaction(s) nstr. 3 and 4)					
Common Stock 05/23/20					2023				P		500	I	<b>\</b> \$3	3.268		3,429		D		
		Tab	le II -	Derivati											Owne	d	,			
				(e.g., pu	ts, cal	ls, v	varra	ınts,	option	ıs, c	onvertib	le se	curiti	es)						
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date Execution Date (Month/Day/Year)			tion Date,	4. Transaction Code (Instr. 8)		5. Numl of Deriv Secu Acqu (A) o Dispo of (D) (Instr	rative rities ired r osed )	6. Date E Expiration (Month/I	on Da			unt of rities rlying ative rity	Derivat Securit (Instr. 5		9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y G G G O (I	.0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amour or Number of Shares	er						

Explanation of Responses:

Remarks:

By John Dunn, Attorney-in-

05/24/2023

<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.