FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

lashington,	D.C.	20549	

STATEMENT	OF CHANG	FS IN BENEFI	CIAI OWNERSHI

OMB APPROVAL									
OMB Number: 3235-									
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(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]					(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner									
(Last) C/O CAI	(F	irst) A, INC.	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/28/2024						X	below)	(give title	J TIVI	Other (s below) E OFFICE			
505 COAST BLVD. S. #307				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) LA JOLI	LA C.	A	92037										X	_	ed by Mor		rting Persor One Repor	- 1
(City)	(S	tate)	(Zip)	ı-Deriv	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. rivative Securities Acquired, Disposed of, or Beneficially Owned													
1. Title of Security (Instr. 3) 2. Transa Date			2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr. 8)		Acquired (A) or f (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of ndirect Beneficial Dwnership Instr. 4)					
		Code V Amount (A) or Prictive Securities Acquired, Disposed of, or Beneficia					ially Owned											
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	ate, Tr.	5. Number of Derivative Securities		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)			Amount s	ount 8. Price of Derivative Security		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Co	ode V	v	(A)	(D)	Date Exercisable	Expiration Date	1 Title	i c			(Instr. 4)	ion(s)		
Employee Stock Option (Right to Buy)	\$4.16	03/28/2024			A		115,000		(1)	03/27/203	4 Comi Sto		115,000	\$0	115,00	00	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.

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

** 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.