FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

mstruct	ion 1(b).			Filed							npany Act			4		,			
1. Name and Address of Reporting Person*  Feener Edward P.				2. Issuer Name <b>and</b> Ticker or Trading Symbol  KalVista Pharmaceuticals, Inc. [ KALV ]								(Che	eck all applic	lationship of Reporting Person(s) to k all applicable)  Director 10%  Officer (give title Othe below) below  Chief Scientific Officer			wner		
(Last) (First) (Middle) C/O KALVISTA PHARMACEUTICALS, INC. 55 CAMBRIDGE PARKWAY, SUITE 901E				3. Date of Earliest Transaction (Month/Day/Year) 06/04/2018								_ 2	below)				specify		
(Street) CAMBRIDGE MA 02142 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
		Tab	le I - Non	-Deriva	ative	Se	curities	s Ac	quired,	Dis	posed o	f, or	Bene	eficiall	y Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			Execution Date,			Code (Instr. 5)				5. Amour Securitie Beneficia Owned F Reported	ities icially d Following (		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	() ()	A) or D)	Price	Transact (Instr. 3 a	tion(s)			(Instr. 4)
		-	Fable II - D								osed of, onvertil				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any		Transaction Code (Instr. I)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Ex Expiration (Month/Da		7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly Di or	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
		I					1 1							r			- 1		

Date

Exercisable

(1)

(D)

## **Explanation of Responses:**

\$8.21

Employee Stock Option

(Right to Buy)

1. The option vests over a 4 year period: 1/48th on July 4, 2018, after which 1/48th of the total shares vest monthly, subject to continued service through each vesting date.

(A)

51,800

/s/Benjamin Palleiko, Attorney- 06/06/2018 in-Fact

\*\* Signature of Reporting Person

Number

of Shares

51,800

\$<mark>0</mark>

Expiration Date

06/03/2028

Title

Common Stock

Date

51,800

D

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).

06/04/2018

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

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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.