Instruction 1(b).

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

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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* Palleiko Benjamin L						2. Issuer Name and Ticker or Trading Symbol KalVista Pharmaceuticals, Inc. [KALV]							of Reporting cable) or r (give title	10% Ov		ner
(Last) (First) (Middle) C/O KALVISTA PHARMACEUTICALS, INC. 55 CAMBRIDGE PARKWAY, SUITE 901E					3. Date of Earliest Transaction (Month/Day/Year) 05/15/2019							X Officer (give title below) CBO, CFO and Secretary				,
(Street) CAMBR (City)		MA 02142 State) (Zip)		4.	Line) X						ne) X Form	idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(3		ole I - Non-D) Oprivativ		curities	- A C (quired D	isnosed (of or Be	neficia	Ily Owner	·			
1. Title of Security (Instr. 3) 2. Transac Date				Transaction	ction 2A. Deemed Execution Date,			3. 4. Securi Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 an		5. Amou Securiti Benefici	int of es ally Following	Form: D	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code V	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)				
			Table II - De e.ز(e.ز					uired, Dis , options,				y 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 Date if any (Month/Day/Yea	Code				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly D	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	\$24.23	05/15/2019		A		33,750		(1)	05/14/2029	Common Stock	33,750	\$0	33,750)	D	

Explanation of Responses:

1. The option vests over a 4 year period: 1/48th on June 15, 2019, after which 1/48th of the total shares vest monthly, subject to continued service through each vesting date.

/s/Benjamin Palleiko

05/17/2019

** 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.