FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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| 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(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* Palleiko Benjamin L (Last) (First) (Middle) C/O KALVISTA PHARMACEUTICALS, INC. 55 CAMBRIDGE PARKWAY, SUITE 901E (Street) CAMBRIDGE MA 02142 (City) (State) (Zip) | | | | | | Issuer Name and Ticker or Trading Symbol KalVista Pharmaceuticals, Inc. [KALV] Inc. [KALV] | | | | | | | 6. I | Relationship of Reporting Person(s) to Issuer Check all applicable) Director 10% Owner Other (specify below) CFO, CBO & Secretary Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
|--|--------|------------|--------|------------------------------|--|---|---|------------------|---|---|---|---|--|--|--|---|---|--|
| 1. Title of Security (Instr. 3) 2. Transport Date (Mon | | | | 2. Transa Date Month/D | 2A. Deemed Execution Date, if any (Month/Day/Year | | 3. Transa Code (8) | oction Instr. | r. 5) (A) or | | ed (A) or tr. 3, 4 and | 5. Amount of Securities Beneficially Owned Folic Reported Transaction (Instr. 3 and | | nt of s Form: ally (D) or (I) (Institution(s) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | te, Tr | transaction ode (Instr. | | | 6. Options, convertil 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | Co | ode V | (. | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Employee Stock Option (Right to Buy) | \$9.28 | 05/17/2022 | | | A | 2 | 25,800 | | (1) | C | 05/16/2032 | Common Stock | 25,800 | \$0.00 | 25,800 |) | D | |
| Restricted Stock Units | (2) | 05/17/2022 | | | A | 3 | 38,700 | | (3) | | (3) | Common Stock | 38,700 | \$0.00 | 38,700 |) | D | |

Explanation of Responses:

- 1. The option vests over a 4 year period: 1/48th on June 17,2022, after which 1/48th of the total shares vest monthly, subject to continued service through each vesting date.
- 2. Each restricted stock unit ("RSU") represents a contingent right to receive 1 share of the Issuer's Common Stock upon settlement for no consideration.
- 3. 1/16th of the total RSUs subject to the Award shall vest on each quarterly anniversary of the Vesting Commencement Date thereafter, subject to continued service through each vesting date.

Remarks:

/s/ Benjamin L. Palleiko, Attorney-in-Fact

05/19/2022

** 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.