FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

· · · · · · · · · · · · · · · · · · ·	D.O		

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden

D

0.5

hours per response:

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

1. Name and Address of Reporting Person* <u>Yea Christopher</u>						2. Issuer Name and Ticker or Trading Symbol KalVista Pharmaceuticals, Inc. [KALV]								Check	tionship of Reporting I call applicable) Director Officer (give title below) Chief Develop		g Person(s) to Iss 10% Ow Other (s		vner
(Last) (First) (Middle) C/O KALVISTA PHARMACEUTICALS, INC 55 CAMBRIDGE PARKWAY, SUITE 901E						3. Date of Earliest Transaction (Month/Day/Year) 08/17/2022								X			pme	below)	
(Street) CAMBRIDGE MA 02142 (City) (State) (Zip)					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								. Indivine)	Form filed by More than One Reporting Person Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				Execution Date,		Code	Transaction Disposed Of Code (Instr.				Benefic		ies ially Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	V		Amount	(A) or (D)	Price		Transac	action(s) 3 and 4)			(11150.4)		
Common	Stock		08/17/2022 M 1,773 A ⁽¹⁾ 34,742 D		D														
Common	Stock			08/17/20)22			S ⁽²⁾			1,145	D	\$14.96	07(3)	33	3,597	D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	tion Date,	4. Transa Code 8)	action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Exp (Mo	ate Exe iration nth/Day	Da		7. Title a Amount Securiti Underly Derivati (Instr. 3	of es ing ve Security	De Se (Ir	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)

Explanation of Responses:

1. Each restricted stock unit represents a contingent right to receive 1 share of the Issuer's Class A Common Stock upon settlement for no consideration.

Code

(A) (D)

1,773

- 2. The sale reported on this Form 4 represents shares sold by the Reporting Person to cover tax withholding obligations in connection with the vesting and settlement of RSUs. The sale was to satisfy tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary transaction by the Reporting Person.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$14.96 to \$15.0249, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth herein.

Date Exercisable

(4)

Expiration Date

Title

Commo

Stock

4. 1/16th of the total restricted stock units 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:

Restricted

Stock Unit

/s/ Benjamin L. Palleiko, Attorney-in-Fact 08/19/2022

** Signature of Reporting Person Date

of Shares

1,773

\$0.00

26,607

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).

08/17/2022

** 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.