SEC Forr	n 4 FORM 4	1 1	UNITEI) STA	TES S	ECURITIE	S AN	DE	ХСНАІ	NGE CO	OMMIS	SSION						
						Washington, D.C. 20549									OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).					ENT 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								Estim	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5				
1. Name and Address of Reporting Person [*] Palleiko Benjamin L					2. Issuer Name and Ticker or Trading Symbol <u>KalVista Pharmaceuticals, Inc.</u> [KALV] 3. Date of Earliest Transaction (Month/Dav/Year)							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Cofficer (give title Other (specify				wner		
(Last) <mark>C/O KAL</mark>	Last) (First) (Middle) C/O KALVISTA PHARMACEUTICALS, INC.					02/11/2024							A below) below CFO, CBO					
55 CAMBRIDGE PARKWAY, SUITE 901E					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) CAMBRIDGE MA 02142												Form filed by More than One Reporting Person						
(City) (State) (Zip)					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.													
		Tab	le I - Noi	n-Deriv	ative S	ecurities Ac	quired,	Dis	posed o	f, or Ben	eficially	/ Owned						
1. Title of Security (Instr. 3) Date (Month/E				action Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year	3. Transaction Code (Instr. 8)		4. Securiti Disposed	es Acquired Of (D) (Instr.	(A) or 3, 4 and 5) or 4 and 5) Beneficiall Owned Fol Reported		Form:	Direct Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)						
Common Stock 02/11					/2024		Α		87,500	⁽¹⁾ A	(2)	199	199,943		D			
		T				curities Acqu Ils, warrants						Owned						
1. Title of Derivative Security (Instr. 3)	Conversion Date Executio or Exercise (Month/Day/Year) if any		3A. Deem Execution if any (Month/Da	n Date, Transactio			6. Date I Expirati (Month/I	on Dat		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	vative derivative urity Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)		

Performance (2) 02/11/2024 Stock Units

Explanation of Responses:

1. Shares earned upon the vesting of a percentage of the performance stock units ("PSUs") granted to the Reporting Person on March 11, 2022. Each PSU represents a contingent right to receive one share of Issuer common stock upon the Issuer's achievement of performance data metric goals ("Performance Metrics"). 100% of the total number of shares subject to the PSUs vested on February 11, 2024, upon Performance Metrics achieved.

Date

Exercisable

(3)

(D)

Expiration

(3)

Title

Commor Stock

Date

2. Each PSU represents a contingent right to receive 1 share of the Issuer's Common Stock upon settlement for no consideration.

3. Shares earned upon the vesting of a percentage of the PSUs granted to the Reporting Person on January 10, 2024. Each PSU represents a contingent right to receive one share of Issuer common stock upon the Issuer's achievement of Performance Metrics. 1/4th of the total number of shares subject to the PSU shall vest on each quarterly anniversary of the Vesting Commencement Date of February 17, 2024, upon Performance Metrics achieved, subject to continued service through each vesting date.

/s/ Benjamin L. Palleiko 02/13/2024

Amount or Number

Shares

83,333

\$<mark>0</mark>

of

** 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).

v

Code

Α

(A)

83,333

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.

Date

83,333

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