

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

<b>OMB APPROVAL</b>	
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

<p>1. Name and Address of Reporting Person*</p> <p><u>Maroney Marcee</u></p> <hr/> <p>(Last) (First) (Middle)</p> <p><u>C/O CARBYLAN THERAPEUTICS, INC.</u></p> <p><u>39899 BALENTINE DRIVE, SUITE 200</u></p> <hr/> <p>(Street)</p> <p><u>NEWARK CA 94560</u></p> <hr/> <p>(City) (State) (Zip)</p>	<p>2. Issuer Name and Ticker or Trading Symbol</p> <p><u>KalVista Pharmaceuticals, Inc. [ CBYL ]</u></p> <hr/> <p>3. Date of Earliest Transaction (Month/Day/Year)</p> <p><u>11/21/2016</u></p> <hr/> <p>4. If Amendment, Date of Original Filed (Month/Day/Year)</p>	<p>5. Relationship of Reporting Person(s) to Issuer (Check all applicable)</p> <p>Director 10% Owner</p> <p><input checked="" type="checkbox"/> Officer (give title below) Other (specify below)</p> <p style="text-align: center;"><u>VP, Clinical Affairs</u></p> <hr/> <p>6. Individual or Joint/Group Filing (Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person</p> <p>Form filed by More than One Reporting Person</p>
--	---	--

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	11/21/2016		M <sup>(1)</sup>		4,664	A	\$7.84	4,664	D	
Common Stock	11/21/2016		F <sup>(1)</sup>		4,255	D	\$8.5932	409	D	
Common Stock	11/21/2016		U <sup>(1)</sup>		409	D	\$8.5932	0	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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 of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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
Stock Option (Right to Buy)	\$7.84	11/21/2016		M <sup>(1)</sup>			2,592	(2)	03/05/2023	Common Stock	2,592	\$0.00	0	D	
Stock Option (Right to Buy)	\$7.84	11/21/2016		M <sup>(1)</sup>			1,339	(2)	06/06/2023	Common Stock	1,339	\$0.00	0	D	
Stock Option (Right to Buy)	\$7.84	11/21/2016		M <sup>(1)</sup>			732	(2)	11/06/2023	Common Stock	732	\$0.00	0	D	

**Explanation of Responses:**

- The transactions reported in this Form 4 were completed pursuant to the consummation of the actions contemplated in that certain Share Purchase Agreement, dated as of June 15, 2016, by and among Carbylan, KalVista Pharmaceuticals Ltd. ("KalVista"), the shareholders of KalVista, and T. Andrew Crockett as the Seller Representative (the "Transaction"), and reflect a 14 to 1 reverse stock split completed immediately prior to the closing of the Transaction.
- The option is fully vested and exercisable.

/s/ Marcee Maroney 11/22/2016

\*\* 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.