FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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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

Name and Address of Reporting Person* Cagle Gerald D.						2. Issuer Name and Ticker or Trading Symbol Clearside Biomedical, Inc. [CLSD]									eck all app	onship of Reporting Person(s) to Issuer all applicable) Director 10% Owner			
(Last)	(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 03/16/2017									Officer (give title below)		Other (specify below)	
C/O CLEARSIDE BIOMEDICAL, INC. 900 NORTH POINT PARKWAY, SUITE 200					4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	6. Individual or Joint/Group Filing (Check Applica				
(Street) ALPHARETTA GA 30005														X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)																
		Tabl	e I - N	on-Deriv	ative S	Secu	ıritie	s Acc	uired, I	Disp	osed of	f, or l	3ene	ficial	y Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day)						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr. and 5)						Secur	icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
									Code	v	Amount	(A (D	a) or	Price	Repoi Trans		(11150: 4)	(111511. 4)	
Common Stock 03/16/20					017		P		5,000		A	\$6.84	10,941		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)	Execution Date, if any		4. Transaction Code (Instr. 8)		5. Number		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instance) 3 and 4)		unt	. Price f ferivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersi Form: Direct (I or Indire (I) (Instr 4)	Beneficial Ownership ct (Instr. 4)	
			Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Num of Shar								

Explanation of Responses:

Remarks:

/s/ Brian F. Leaf, Attorney-in-Fact 03

03/20/2017

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).