FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response	0.5								

Instruct	tion 1(b).			File	ed purs	suant Section	to Section on 30(h) o	n 16(a of the	a) of the Sec Investment	uritie Con	es Exchang npany Act	ge Act of of 1940	1934		liouis	perio	оропос.	0.0
1. Name and Address of Reporting Person* SHAFFER CHRISTY L					2. Issuer Name and Ticker or Trading Symbol Clearside Biomedical, Inc. [CLSD]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	(First)	(Middle)			Date o		Trans	action (Month/Day/Year)						er (give title		Other (s below)	·
C/O CLEARSIDE BIOMEDICAL, INC. 900 NORTH POINT PARKWAY, SUITE 200				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ine) Form filed by One Reporting Person					
(Street)	RETTA (GA	30005												filed by Mo		n One Repo	
(City)		State)	(Zip)		R	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.									I to			
		Tat	ole I - Nor	n-Deriv	ativ	e Se	curities	s Ac	quired, D	isp	osed o	f, or Be	neficia	lly Owne	d			
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)					ear) l	2A. Deemed Execution Date if any (Month/Day/Yea		Code (Instr.					Benefi	ies cially Following	Form (D) o	n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	Code V		(A) or (D)		Transa	ction(s) 3 and 4)				
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 Day if any (Month/Day/	Date,	4. Transa Code (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 o Derivative Security (Instr. 5)		e s ally g	y Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares					
Stock Option (right to	\$1.15	06/20/2024			A		45,000		(1)	0	6/19/2034	Common Stock	45,000	\$0	45,00	00	D	

Explanation of Responses:

buy)

1. The shares underlying this option vest in full on the earlier of the Issuer's next annual meeting of stockholders or June 20, 2025, subject to the Reporting Person's continuous service as of such vesting date.

/s/ Mark Ballantyne, Attorneyin-Fact

06/21/2024

** 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.