FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
rvasinigton,	D.C.	20040

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number: 3235-026 Estimated average burden									
	hours per responsi	e: 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

1. Name and Address of Reporting Person* <u>Hutson Nancy J</u>					Cle	2. Issuer Name and Ticker or Trading Symbol Clearside Biomedical, Inc. [CLSD]								Relationship of Reporting Per (Check all applicable) X Director			10% Ow	ner
(Last)	(F	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/22/2023								Officer below)	(give title		Other (s below)	pecify
C/O CLEARSIDE BIOMEDICAL, INC. 900 NORTH POINT PARKWAY, SUITE 200					4. If <i>A</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person					
(Street)	RETTA C	A	30005										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.									d to			
		Tab	le I - Noi	า-Deriv	ative	Sec	curities	s Ac	quired, D	ispo	osed o	f, or Be	neficial	ly Owned	t			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,			Code (Ins	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)				Benefici	es Fo ally (D) Following (I)	Form (D) o	rm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) o (D)	r Price	Transaci (Instr. 3	action(s)		(Instr. 4)
		Т							uired, Dis , options					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemo Execution if any (Month/Da	Date,	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)		le and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	O N Date Expiration O					Amount or Number of Shares							
Stock Option (right to buy)	\$1.31	06/22/2023			A		30,000		(1)	06/2	21/2033	Common Stock	30,000	\$0.00	30,000)	D	

Explanation of Responses:

1. The shares underlying this option vest in full on the earlier of the Issuer's next annual meeting of stockholders or June 22, 2024, subject to the Reporting Person's continuous service as of such vesting date.

Remarks:

/s/ Mark Ballantyne, Attorneyin-Fact

** Signature of Reporting Person

06/23/2023

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.