FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number: 3235-02									
Estimated average burden									
hours per response:	0.5								

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* Humphries William D.						2. Issuer Name and Ticker or Trading Symbol Clearside Biomedical, Inc. [CLSD]										eck all appli	nship of Reportino I applicable) Director		son(s) to Iss 10% Ov	
	EARSIDE I	irst) BIOMEDICAL, Ξ Γ PARKWAY, SI			01/	3. Date of Earliest Transaction (Month/Day/Year) 01/10/2022										below			Other (: below)	
(Street) ALPHARETTA GA 30005 (City) (State) (Zip)					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - Non	-Deriv	ative	e Se	curit	ies Ac	qui	ired, [Disp	osed o	f, or	Ben	eficiall	y Owned	l			
Date						2A. Deemed Execution Date, if any (Month/Day/Year)		•,	3. Transaction Code (Instr. 8)						Benefic	es ally Following	Form (D) o	n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										Code	v	Amount		(A) or (D)	Price	Transac (Instr. 3	tion(s)			(11301.4)
Common Stock 01/				01/10	0/202	/2022				М		22,72	22,727 A \$		\$0.15	5 28	28,313		D	
		-	Table II - D									sed of, onvertil				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, T	1. Fransa Code (I		of		Exp	Date Exe piration pnth/Day	Date	of Secur		curities erlying vative S	s Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	te ercisable		xpiration ate	Title	1	Amount or Number of Shares					
Stock Option (right to buy)	\$0.15	01/10/2022			М			22,727		(1)	0	1/30/2022	Comr		22,727	\$0.00	0		D	

Explanation of Responses:

1. Fully vested and exercisable.

Remarks:

/s/ Mark Ballantyne, Attorneyin-Fact

** Signature of Reporting Person

01/11/2022 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.