Chec

FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C. 20549
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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

OMB APPROVAL 3235-0287 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*     Wicki Mark T					2. Issuer Name and Ticker or Trading Symbol Kala Pharmaceuticals, Inc. [ KALA ]								(Chec	X Director 10% Owner				
(Last) (First) (Middle) C/O KALA PHARMACEUTICALS, INC. 490 ARSENAL WAY, SUITE 120					3. Date of Earliest Transaction (Month/Day/Year) 06/28/2021								X	X Officer (give title Other (specify below)  CHIEF EXECUTIVE OFFICER				
				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi Line) X	′						
	Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	icially	y Own	ed			
Date				Execution Date, y/Year) if any		Date,	3. Transaction Code (Instr. 8) 4. Securitie Disposed C			es Acqı Of (D) (I	uired (A) Instr. 3,	4 and Securi Benefi Owned		ties cially Following	Form (D) o	n: Direct or Indirect	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) (D)	or Pr	ice	Transa	action(s)			(Instr. 4)
Common Stock 06/28/2					2021			S		7,586(1)	I	) \$	5.77	296,274 <sup>(2)</sup>			D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
				4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo of (D (Instr and §	vative irities iired r osed ) r. 3, 4	Expiration Da (Month/Day/Y		te ear) Expiration	Amou or Numb of		De Se (In:	rivative curity	derivative Securities Beneficiall Owned Following Reported	у	Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	(F) LA PHAR SENAL WA TOWN M (S) Security (Institute of Conversion of Exercise Price of Derivative)	(First) ((LA PHARMACEUTICALS SENAL WAY, SUITE 120  TOWN MA (State) ((Table Security (Instr. 3)  Security (Instr. 3)  Stock  Table Security (Instr. 3)  2. Conversion or Exercise Price of Derivative (Month/Day/Year)	(First) (Middle)  LA PHARMACEUTICALS, INC.  SENAL WAY, SUITE 120  TOWN MA 02472  (State) (Zip)  Table I - No  Security (Instr. 3)  Stock  Table II -  Conversion or Exercise Price of Derivative  Output  Table II -  2. (Month/Day/Year)  Month/Day/Year)  A. Derivative  Table II -  A. Derivative  Table II -  (Month/Day/Year)	Mark T  (First) (Middle)  LA PHARMACEUTICALS, INC.  SENAL WAY, SUITE 120  TOWN MA  02472  (State) (Zip)  Table I - Non-Derivation  Security (Instr. 3)  2. Transact Date (Month/Date) (Month/Date)  Conversion or Exercise Price of Derivative (Month/Day/Year)  2. (Month/Day/Year)  3. Transaction Date (Month/Day/Year)	Mark T  (First) (Middle)  LA PHARMACEUTICALS, INC.  SENAL WAY, SUITE 120  TOWN MA  02472  (State) (Zip)  Table I - Non-Derivative Security (Instr. 3)  2. Transaction Date (Month/Day/Year)  1 Stock  Table II - Derivative Security (e.g., puts, call fany (Month/Day/Year)  2. Conversion or Exercise Price of Derivative Security (Month/Day/Year)  2. (State) (Zip)  3. Transaction Date (E.g., puts, call fany (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  2. (State) (Zip)  4. If Mark T	Mark T  (First) (Middle)  LA PHARMACEUTICALS, INC.  SENAL WAY, SUITE 120  Table I - Non-Derivative Security (Instr. 3)  Table II - Non-Derivative Security (Month/Day/Year)  Table II - Derivative Security (e.g., puts, calls, volume of Exercise Price of Derivative Security (Month/Day/Year)  2. Transaction Date (Month/Day/Year)  Table II - Derivative Security (e.g., puts, calls, volume of Exercise (Month/Day/Year)  A. Transaction Date (Month/Day/Year)  A. Transaction Code (Instr. 8)	Mark T  (First) (Middle)  LA PHARMACEUTICALS, INC.  SENAL WAY, SUITE 120  Table I - Non-Derivative Securities  (State) (Zip)  Table I - Non-Derivative Securities  (Month/Day/Year)  Security (Instr. 3)  2. Transaction Date (Month/Day/Year)  Table II - Derivative Securities (e.g., puts, calls, warrance)  (Ronth/Day/Year)  2. Transaction Date (month/Day/Year)  A. Transaction Code (Instr. 8)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date (Instr. 8)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  2. Transaction Date (Instr. 8)  3. Transaction Date (Month/Day/Year)  3. Transaction Date (Instr. 8)  3. Transaction Date (Month/Day/Year)  2. Transaction Date (Instr. 8)  3. Transaction Date (Instr. 8)  4. Transaction Date (Instr. 8)  5. No of Derivative Securities (A)	Security (Instr. 3)   Security (Instr. 3)	Kala Pharmaceuticals,	Code   V   Code   V   Code   Conversion or Exercisor of Execurity (Month/Day/Year)   Code (Instr. 3)   Code (Instr. 3)	Kala Pharmaceuticals, Inc.   KALA	Kala Pharmaceuticals, Inc. [ KALA ]	Kala Pharmaceuticals, Inc.   KALA	Chec   X   X   X   X   X   X   X   X   X	Kala Pharmaceuticals, Inc. [KALA]   Check all app X   Direct Direction (First)   (Middle)   (Check all app X   Direct Delow   (Month/Day/Year)   (Month/Day	Kala Pharmaceuticals, Inc.   KALA	Check all applicable   X Director   X Officer (give title below)   CHIEF EXECUTIV	Kala Pharmaceuticals, Inc.   KALA   Check all applicable)   X Director   10% O   X Officer (give title below)   CHIEF EXECUTIVE OFFIC   Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   Security (Instr. 3)   2. Transaction   2. Transaction   Month/Day/Year   Officer (give title below)   CHIEF EXECUTIVE OFFIC   Non-Derivative Securities   Acquired (Month/Day/Year)   Securities   Acquired (A) or Person   Code (Instr. 3)   Securities   Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)   Securities   Securitie

## **Explanation of Responses:**

- 1. This sale was made pursuant to a 10b5-1 trading plan to cover tax withholding obligations in connection with the vesting and settlement of the reporting person's restricted stock units granted on June 25, 2020.
- 2. Includes 279,080 unvested RSUs.

/s/ Eric Trachtenberg, Attorney-in-Fact

06/29/2021

\*\* 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.