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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)														
Name and Address of Reporting Person * Romano Sarah				2. Issuer Name and Ticker or Trading Symbol EYEGATE PHARMACEUTICALS INC [EYEG]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title below) Chief Financial Officer					
(Last) (First) (Middle) C/O EYEGATE PHARMACEUTICALS, INC., 271 WAVERLEY OAKS ROAD, SUITE 108				3. Date of Earliest Transaction (Month/Day/Year) 03/09/2020								Cnie	i Financial (Officer		
(Street) WALTHAM, MA 02452				4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 2A. Deemed 3. Transaction 4. Securities Acquired 5. Amount of Securities 6. 7. Nature											
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		e, if	(Instr. 8)		4. Securities Acquire (A) or Disposed of ((Instr. 3, 4 and 5)		(D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		ollowing		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	V	Amou	or		rice				(I) (Instr. 4)	(msu: 1)
Common Stock 03/09/2020				F ⁽¹⁾		130	D	\$ 5.0 (2)	-	26,612 D		D				
Reminder:	Report on a s	separate line fo		Derivative Secu	ıritie	es Acqu	Pe co the	rsons we ntained to form of the Disposed	ho res in this isplays	forms a cu Benef	n are urren ficially	not requ tly valid		ormation spond unle trol numbe	ss	1474 (9-02)
1. Title of	2	3. Transaction		(e.g., puts, calls,	war 5			ns, conve				le and	8. Price of	9. Number	of 10.	11. Natur
		nversion Date Exercise (Month/Day/Y	on Date (Month/Day/Year) Execution Date any (Month/Day/Y	te, if Transaction Code Year) (Instr. 8)		Number and		d Expira	I Expiration Date onth/Day/Year)		Amou Unde Secur	ount of Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form o Derivat Security Direct (or Indir	hip of Indirect Beneficia Ownershi (Instr. 4) D) ect	
				Code	V ((A) (E	Ex	ate kercisable	Expira Date	ation	Title	Amount or Number of Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Romano Sarah C/O EYEGATE PHARMACEUTICALS, INC. 271 WAVERLEY OAKS ROAD, SUITE 108 WALTHAM, MA 02452			Chief Financial Officer					

Signatures

/s/ Sarah Romano	03/10/2020

**Signature of Reporting Person	Date			

Explanation of Responses:

- * 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).
- (1) Sale of shares to cover taxes due on restricted stock that vested on 03/01/2020.
 - The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$5.00 to \$5.07, inclusive. The reporting
- (2) person hereby undertakes to provide to EyeGate Pharmaceuticals, Inc., any security holder of EyeGate Pharmaceuticals, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (2) to this Form 4.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.