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

(Print or Type Perponses)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

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

| 1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Trading Symbol Romano Sarah EYEGATE PHARMACEUTICALS INC [EYEG] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner XOfficer (give title below)Other (specify below) Chief Financial Officer | | | | | |
|--|----------------|---|------------------|---------|--|--|---|--|-------------------|----------|
| (Last) (First) (M C/O EYEGATE PHARMACEUTICA INC., 271 WAVERLEY OAKS ROA SUITE 108 | ALS, 1 | 3. Date of Earliest Transaction (Month/Day/Year) 11/02/2020 | | | | | | | Jincer | |
| (Street) WALTHAM, MA 02452 | 4. | 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) | Tab | ole I - Non- | Deri | ivative Se | curitie | s Acqui | ired, Disposed of, or Beneficially | Owned | |
| (Instr. 3) Date | h/Day/Year) ar | A. Deemed 3. Transaction 4. Securities code (A) or Dispose (Instr. 8) (Instr. 3, 4 an Anth/Day/Year) | | isposed | of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | Code | v | Amount | (A) or (D) | Price | | (I) (Instr. 4) | (1150.4) |
| Common Stock 11/02 | 2/2020 | | F ⁽¹⁾ | | 97 | D | \$ 3.51 | 25,819 | D | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number

SEC 1474 (9-02)

the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

| | (e.g., puts, cans, warrants, options, convertible securities) | | | | | | | | | | | | | | | | |
|-------------|---|------------------|--------------------|------------|-----|--------|-------|---------------------|------------|----------------------|--------------|-------------|----------------|-------------|-------------|---------|------------|
| 1. Title of | 2. | | 3A. Deemed | 4. | 5 | 5. | | 6. Date Exer | cisable | 7. Tit | le and | 8. Price of | 9. Number of | 10. | 11. Nature | | |
| Derivative | Conversion | Date | Execution Date, if | Transactio | n N | Numb | ber | and Expiration Date | | ation Date Amount of | | Derivative | Derivative | Ownership | of Indirect | | |
| Security | or Exercise | (Month/Day/Year) | any | Code | C | of | | (Month/Day/Year) | | (Month/Day/Year) | | Unde | rlying | Security | Securities | Form of | Beneficial |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Ι | Deriva | ative | Securities | | (Instr. 5) | Beneficially | Derivative | Ownership | | | | |
| | Derivative | | | | S | Securi | ities | | | (Instr. 3 and | | | Owned | Security: | (Instr. 4) | | |
| | Security | | | | A | Acqui | red | | | 4) | | | Following | Direct (D) | | | |
| | | | | | ` | A) or | | | | | | | 1 | or Indirect | | | |
| | | | | | | Dispo | | | | | | | Transaction(s) | · / | | | |
| | | | | | | of(D) | | | | | | | (Instr. 4) | (Instr. 4) | | | |
| | | | | | | Instr. | · · · | | | | | | | | | | |
| | | | | | 4 | 1, and | 5) | | | | | | | | | | |
| | | | | | | | | | | | Amount | | | | | | |
| | | | | | | | | Date | Expiration | | or | | | | | | |
| | | | | | | | | Exercisable | | Title | Number | | | | | | |
| | | | | | | | | Excicisable | Date | | of | | | | | | |
| | | | | Code V | V | (A) | (D) | | | | 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 | 11/03/2020 | |
|---------------------------------|------------|--|
| **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 11/01/2020.

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.