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

pe Response	s)															
Name and Address of Reporting Person * Romano Sarah				2. Issuer Name and Ticker or Trading Symbol EYEGATE PHARMACEUTICALS INC [EYEG]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below)				
(Last) (First) (Middle) C/O EYEGATE PHARMACEUTICALS, INC., 271 WAVERLEY OAKS ROAD, SUITE 108				3. Date of Earliest Transaction (Month/Day/Year) 01/04/2021								Chie	f Financial C	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 Person Form filed by More than One Reporting Person				
(City) (State) (Zip)				Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	any		Code (Instr. 8)		(d of (I	D) E	Beneficially Owned l		ollowing	Ownership Form: H Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	е	V	Amount	or (D)	Pric	ce				(I) (Instr. 4)	
Common Stock 01/04/2021				F(1)	1		115	D	\$ 4.85 (2)	5 2	25,613		D			
Report on a s	separate line fo	Table II -	Derivative Sec	curiti	es Acqı	P c tl	Personta conta he fo	ons whained in orm dis	o resp n this f splays	orm a a cur	are r rrent cially	not requ lly valid	ired to res	pond unle	ss	1474 (9-02)
2	3 Transaction		3 / 1 /									e and	8 Price of	0 Number	of 10	11. Natur
Conversion or Exercise	Date Exercise (Month/Day/Y) te of rivative	ersion Date Execution Date of Month/Day/Year) Execution Date any (Month/Day/Year)	te, if Transaction Code Year) (Instr. 8)		Number of (Mo Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		and E	d Expiration Date (onth/Day/Year)		A U S (1	Amou Jnder Securi Instr.	derlying Derivativ Security (Instr. 5)	Derivative Security	Derivative Securities Beneficially Owned Following Reported	Owners Form o Derivat Security Direct (or Indir	hip of Indirect Beneficia Ownershi (Instr. 4) D)
			Code	V	(A) (I]				ion T	Title !	or Number of				
	AM, MA (Stock Report on a s Conversion or Exercise Price of Derivative	AM, MA 02452 (Street) AM, MA 02452 (State) ecurity 2. Conversion or Exercise Price of Derivative Address of Reporting Per Sarah (First) (First) (First) (Street) (Street) AM, MA 02452 (State) (State) (State) (Month/Day/V	d Address of Reporting Person* Sarah (First) (Middle) EGATE PHARMACEUTICALS, 1 WAVERLEY OAKS ROAD, 08 (Street) AM, MA 02452 (State) (Zip) ecurity 2. Transaction Date (Month/Day/Year) Table II - Conversion or Exercise Price of Derivative 3A. Deemed Execution Da any (Month/Day/Year)	d Address of Reporting Person Sarah Conversion of Exercise Price of Derivative Security Securi	2. Issuer Name at EYEGATE PH [EYEG] 3. Date of Earliest 01/04/2021 Stock 01/04/2021 Conversion of Exercise Price of Derivative Security Table II - Derivative Security Table II - Derivative Security Security 2. 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If Amendment, Date Original Filed(Month/Day/Year) 08 Table 1- Non-Derivative Securities Acquired (Instr. 8) (Instr. 3, 4 and 5) (Instr. 3 and 4) Execution Date (Instr. 3 and 4) Stock 01/04/2021 115 D 4.85 25,613 20 Conversion Date (Che Disposed of, or Beneficially Owned (Instr. 3) Table 11- Derivative Securities Acquired (Instr. 3) A Deemed Execution Date, if one of the collection of instr. 3 and 4) Table 11- Derivative Securities Acquired (Instr. 3) Table 11- Derivative Securities Acquired (Instr. 3) A Deemed Execution Date, if one of the collection of instr. 3 and 4) Table 11- Derivative Securities Acquired (Instr. 3) Table 11- De	2. Issuer Name and Ticker or Trading Symbol EYEGATE PHARMACEUTICALS INC [EYEG] 3. Date of Earliest Transaction (Month/Day/Year) 01/04/2021 4. If Amendment, Date Original Filed(Month/Day/Year) 01/04/2021 5. Relationship of Reporting Person Chief Financial C Chief	2. Issuer Name and Ticker or Trading Symbol EYEGATE PHARMACEUTICALS INC [EYFG] (First) (Middle) (Grant PHARMACEUTICALS) (STATE PHARMACEUTICALS) (Month/Day/Year) (STATE PHARMACEUTICALS) (STATE PHARMACEUTICALS) (Month/Day/Year) (STATE PHARMACEUTICALS) (Month/Day/Year) (STATE PHARMACEUTICALS) (STATE PHARMACEUTICALS) (Month/Day/Year) (STATE PHARMACEUTICALS) (Abdule) (STATE PHARMACEUTICALS) (Month/Day/Year) (STATE PHARMACEUTICALS) (Month/Day/Year) (STATE PHARMACEUTICALS) (Month/Day/Year) (A) Transaction (Check all application) (A) Information Chief present (Check all application) (A) Transaction (B) Transaction (Check all application) (A) Information Chief (Privative Securities) (A) Information Chief (Privative Securities) (Month/Day/Year) (Mo

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	01/05/2021

**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 01/01/2021.
 - The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$4.84 to \$4.85, 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.