FORM 4

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

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OMB Number:	3235-0287
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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 reesponse	/													
1. Name and Address of Reporting Person* HANCOCK THOMAS			2. Issuer Name and Ticker or Trading Symbol EYEGATE PHARMACEUTICALS INC [EYEG]					VEGI	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner						
(Last) (First) (Middle) C/O EYEGATE PHARMACEUTICALS, INC., 271 WAVERLEY OAKS ROAD, SUITE 108				3. Date of Earliest Transaction (Month/Day/Year) 02/01/2021							Officer (given	re title below)	Oth	er (specify belo	w)
(Street) WALTHAM, MA 02452			4. If Amendment, Date Original Filed(Month/Day/Year)						_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City	y)	(State)	(Zip)			Ta	able I	- Non-Deri	vative Securit	ies Acquired	l, Disposed	of, or Bend	eficially Owr	ed	
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	2A. Dee Executionary (Month/	on Da	te, if		. 8) (1	A) or Disposed Instr. 3, 4 and 5	Ow Tra (Ins			ed	Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Reminder:	report on a .	•						contair	s who respo ned in this fo	rm are not	required	to respon	d unless th		474 (9-02)
Reminder:	report on a .	•						contair form di juired, Disp	ned in this fo splays a cur osed of, or Be	rm are not rently valid neficially Ov	required d OMB co	to respon	d unless th		.474 (9-02)
1. Title of	2. Conversion	3. Transaction	3A. Deemed Execution Date, if	(e.g., put 4. Transac Code	es, call	s, war 5. Num of Derivat Securit Acquire A) or Dispose of (D) Instr. 3	rants aber tive ies ed	contair form di juired, Disp	ned in this for splays a cur osed of, or Benovertible securitisable and Date	rm are not rently valid neficially Ov	required if OMB covered district Amount ring	to respond ntrol numbers	d unless th	f 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Natur of Indired Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	3A. Deemed Execution Date, if any	(e.g., put 4. Transac Code	es, call	s, war 5. Num of Derivate Gecurit Acquire A) or Dispose of (D)	rants aber tive ies ed	contair form di juired, Dispos, options, co 6. Date Exe Expiration I	ned in this for splays a cur osed of, or Beinvertible securisable and Date //Year)	rm are not rently valid neficially Overities) 7. Title and of Underly Securities	required if OMB covered district Amount ring	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	f 10. Ownersl Form of Derivati Security Direct (I or Indire s) (I)	11. Natur of Indired Beneficia Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
HANCOCK THOMAS C/O EYEGATE PHARMACEUTICALS, INC. 271 WAVERLEY OAKS ROAD, SUITE 108 WALTHAM, MA 02452	X					

Signatures

/s/ Sarah Romano, Attorney-in-Fact*	02/03/2021
**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) The Reporting Person received an Option to purchase Common Stock from the Issuer pursuant to the Issuer's 2014 Equity Incentive Plan. The Option will become fully exercisable on February 1, 2022.

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.