FORM	4
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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).

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

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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

(rint of Type Responses)											
1. Name and Address of Reporting Person [*] Romano Sarah	2. Issuer Name and EYEGATE PHA			· ·		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) C/O EYEGATE PHARMACEUTIC INC., 271 WAVERLEY OAKS RO 108	3. Date of Earliest T 02/01/2021	ransaction (Mont	h/Day/Ye	ar)	X_Officer (give title below)Other (specify below) _					
(Street) WALTHAM, MA 02452		4. If Amendment, D	ate 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 Acqu						uired, Disposed of, or Beneficially Owned			
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if any	3. Transact Code (Instr. 8)	ion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			· · · · · · · · · · · · · · · · · · ·		Beneficial	
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock	02/02/2021		F <u>(1)</u>		1,282	D	\$ 6.34 (<u>2</u>)	24,331	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 SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

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

	(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)														
Security	Conversion	Date (Month/Day/Year)	· · · ·	Code)	5. Numb of Deriva Securitie Acquired or Dispos of (D) (Instr. 3, and 5)	mber rivative ities ired (A) sposed . 3, 4,		able and 7. Title and Amount of Underlying ear) Securities		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s)	Derivative Security: Direct (D) or Indirect (I)	Beneficial	
				Code	v	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option (right to buy)	\$ 6.46	02/01/2021		А		30,000		(3)	02/01/2031	Common Stock	30,000	\$ 0	30,000	D	

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	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) Sale of shares to cover taxes due on restricted stock that vested on 02/01/2021.
- The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$6.34 to \$6.35, inclusive. The reporting person hereby (2) 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.
- (3) 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 exercisable as to one-third (1/3) of the shares underlying the Option on February 1, 2022, and the remaining balance vests monthly on the first day of each calendar month thereafter for a period of two years.

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.