## FORM 4

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

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
nours per response	e 0.5						

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)															
1. Name and Address of Reporting Person* MALFROY-CAMINE BERNARD				2. Issuer Name and Ticker or Trading Symbol EYEGATE PHARMACEUTICALS INC [EYEG]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director Officer (give title below)  10% Owner 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) 05/01/2015													
(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)		Ta	able I -	Non-l	Deri	vative S	Securit	ies A	Acqui	red, Disp	osed of, or l	Beneficially	Owned	
1.Title of S (Instr. 3)	Instr. 3) Dat		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if ) any (Month/Day/Year)		f Code (Instr. 8)			(Instr. 3, 4 and 5) (A) or		ed of 1 5)		D) Beneficially Owned Follows Reported Transaction(s) (Instr. 3 and 4)		ollowing	6. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4)	
Common Stock 05/01/2015				Code V A			Amour 11,52	_	+	\$ 0	11,525			D			
Reminder:	Report on a s	separate line fo	r each class of secur				Po co th	erso onta ne fo	ons whained in orm dis	no resp n this t splays	forn a cı	n are urrer	not requality valid	OMB con	formation spond unleader	ess	C 1474 (9-02
			Table II - I	Derivative <i>e.g.</i> , puts,									ly Owned				
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Date Conversion or Exercise Price of Derivative Securities S. Transaction Date (Month/Day/Year) 3A. Deemed Execution Date, if Code (Instr. 8) 5. Number of Code (Instr. 8) 5. Number of Derivative Securities Securities 6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Undo Secu	ount of derlying urities tr. 3 and  Derivativ Security (Instr. 5)		9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form of Deriva Securi Direct or Indi	tive Owners (Instr. 4) (D) rect									
				Coo	de V	(A) (		Date Exerc	cisable	Expirat Date	tion	Title	Amount or Number of Shares				

### **Reporting Owners**

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

### **Signatures**

/s/ Authorized Signatory*	05/05/2015
**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 Restricted Shares from the Issuer pursuant to the Issuer's 2014 Equity Incentive Plan, which are subject to vesting and certain other conditions. 13% of the Restricted Shares are fully vested as of the Transaction Date, and 29% vest on each of June 30, 2015, September 31, 2015, and December 31, 2015.

#### Remarks:

\*Signed under power of attorney on behalf of Reporting Person

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.