## FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burden					
hours per response	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 Type Responses)  1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol								5. Re	5. Relationship of Reporting Person(s) to Issuer				
Romano Sarah				EYEGATE PHARMACEUTICALS INC [EYEG]							C [EYE	-	Director	(Check	all applicable	) Owner	
	GATE PH	(First) [ARMACEUTIC LEY OAKS RO	· · · · · · · · · · · · · · · · · · ·	3. Date 04/17/		arliest Tr 8	ansac	tion (M	Ionth/Da	y/Year	;)	X	Officer (give		Other	(specify belower	r)
(Street) WALTHAM, MA 02452				4. If Amendment, Date Original Filed(Month/Day/Year)							ear)	_X_ F	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	r)	(State)	(Zip)				Table	l - No	n-Deriv	ative S	ecurities	Acquired,	Disposed	of, or Benef	icially Owned		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea			2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		(A (Im	4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)  (A) or Amount (D)		f (D) Own Tran	Transaction(s) (Instr. 3 and 4)		I (C) F I C (C) (C) (C) (C) (C) (C) (C) (C) (C) (	Ownership orm: Oirect (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common	Stock		04/17/2018					P	62	2,500	A	<u>(1)</u> 106	,863		I	)	
			Table II									icially Own	ed				
Derivative Security (Instr. 3)	2. Conversion Date (Month/Day/Year Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. Nur Transaction of Der Code Securi (Instr. 8) Acqui or Dis of (D) (Instr.		5. Num of Deri Securiti Acquire or Disp of (D) (Instr. 3	mber ivative Expiration I (Month/Day as 4, 4, 5)			Date of Un y/Year) Secu		7. Title and of Underly Securities	Title and Amount Underlying		9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficia Ownersh (Instr. 4)
				Code	V	and 5)	(D)		cisable	Expii Date	ration	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)	(I) (Instr. 4)	
Warrants (right to	\$ 0.32	04/17/2018		P		62,500	0	04/1	7/2018	04/1	7/2023	Commor Stock	62,500	<u>(1)</u>	62,500	D	
buy)																	

	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/ Robert A. Petitt, attorney-in-fact	04/18/2018
**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 reported securities were purchased by the reporting person for a combined purchase price of \$0.32 per share of common stock and warrant in connection with the Issuer's public offering that closed on April 17, 2018. Each warrant will be exercisable during the period commencing on April 17, 2018 and ending on April 17, 2023 at an exercise price of \$0.32.

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.