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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
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| |
| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

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| 1. Name and Address of Reporting Person* GOLDBERG MORTON | | | 2. Issuer Name and Ticker or Trading Symbol <u>EYEGATE PHARMACEUTICALS INC</u> [EYEG] | | tionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner | | |
|---|---------|----------|---|------------------|--|-----------------------|--|
| (Last) (First) (Middle) C/O EYEGATE PHARMACEUTICALS, INC. 271 WAVERLEY OAKS ROAD, SUITE 108 | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | - | Officer (give title below) | Other (specify below) | |
| | | | 08/28/2015 | | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indi Line) | vidual or Joint/Group Fili Form filed by One Re | | |
| WALTHAM | MA | 02452 | _ | | 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) | if any 🧴 | 3. Transa Code (l 8) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|----------|-------------------------------|---|----------|---------------|-------------------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | |
| Common Stock | 08/28/2015 | | Α | | 4,563(1) | Α | \$ <mark>0</mark> | 9,441 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|-------|-----|--|--------------------|--|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Stock Option (right to buy) | \$3.59 | 08/28/2015 | | A | | 8,000 | | (2) | 08/28/2025 | Common Stock | 8,000 | \$0 | 8,000 | D | |

Explanation of Responses:

1. The Reporting Person received Restricted Shares from the Issuer pursuant to the Issuer's 2014 Equity Incentive Plan. The Restricted Shares are not subject to vesting.

2. The Reporting Person received an Option to purchase Common Stock from the Issuer pursuant to the Issuer's 2014 Equity Incentive Plan. The Option became exercisable as to 25% of the shares underlying the Option on August 28, 2015, 25% of the shares underlying the Option became exercisable on August 28, 2016, and the remaining balance vests monthly on the first day of each calendar month thereafter for a period of two years.

Remarks:

*Signed under power of attorney on behalf of Reporting Person

/s/ Authorized Signatory*

09/01/2015

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.