FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or S	Section	on 30(h) o	of the Ir	nvestmen	t Com	pany Act	of 19	40						
1. Name and Address of Reporting Person [*] Mann Brenda					2. Issuer Name and Ticker or Trading Symbol EYEGATE PHARMACEUTICALS INC EYEG]								(Ch	5. Relationship of Reporti (Check all applicable) Director X Officer (give title			son(s) to Iss 10% Ow Other (s	wner	
(Last)	.ast) (First) (Middle)															below)		below)	` ´
C/O EYEGATE PHARMACEUTICALS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 02/14/2020										VP of	Research	1 & D	evelopme	nt
271 WAVERLY OAKS ROAD, SUITE 108																			
(Street) WALTHAM MA 02452				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)												1 01301	•			
		Tab	le I - Nor	า-Deriva	ative	Se	curities	s Acq	uired,	Disp	osed o	of, o	r Ben	eficial	ly Owned	k			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			d (A) or c. 3, 4 and	I Securition Benefici	Amount of ecurities eneficially wned Following		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount		(A) or (D)	Price	Transac	Transaction(s) (Instr. 3 and 4)		`	(111301. 4)	
Common Stock 02/14/					/2020		A		7,500	7,500 ⁽¹⁾ A		\$0	18,398		D				
		7	able II -	Derivat (e.g., p											Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, 1	Code (Inst		n of		i. Date Ex Expiration Month/Da	Date		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e C s i lly i	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
													- 1	Amount					

Explanation of Responses:

\$6.55

Stock Option

(right to

buy)

1. Grant of restricted stock from the Issuer pursuant to the Issuer's 2014 Equity Incentive Plan (the "Plan"). The restrictions will vest as to one-third (1/3) of the shares on February 1, 2021, and the remaining balance will vest monthly on the first day of each calendar month thereafter for a period of two years.

Date Exercisable

(2)

Expiration

02/14/2030

Date

Title

Common

Stock

2. The Reporting Person received an Option to purchase Common Stock from the Issuer pursuant to the Plan. The Option will become exercisable as to one-third (1/3) of the shares underlying the Option on February 1, 2021, and the remaining balance vests monthly on the first day of each calendar month thereafter for a period of two years.

/s/ Sarah Romano, Attorney-in-Fact* 02/19/2020

Shares

7,500

\$0

** Signature of Reporting Person Date

7,500

D

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).

02/14/2020

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code V

Α

(A)

7,500

(D)

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.