SEC Form 4	
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## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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												

Estimated average burden hours per response: 0.5	L			
hours per response: 0.5	l	Estimated average burden		
		hours per response:		0.5

1. Name and Address of <u>Eastman Ronal</u>	1 0	*	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>pSivida Corp.</u> [ PSDV ]		tionship of Reporting Perso all applicable) Director	on(s) to Issuer 10% Owner	
		. ,	3. Date of Earliest Transaction (Month/Day/Year) 03/28/2018		Officer (give title below)	Other (specify below)	
(Street) THE WOODLANDS	IE TX 77380		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Filing Form filed by One Repor Form filed by More than Person	ting 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)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership 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)		(Instr. 4)	
Common Stock, \$0.001 par value								8,273,461	Ι	By EW Healthcare Partners L.P. <sup>(1)</sup>	
Common Stock, \$0.001 par value								332,863	Ι	By EW Healthcare Partners-A L.P. <sup>(2)</sup>	

# 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. 5. Nu Transaction of Code (Instr. 8) Secu Acqu (A) on Dispo of (D) (Instr and 5		ative rities ired osed	Expiration Date (Month/Day/Year)		7. Title Amour Securi Underi Deriva Securi and 4)	nt of ties ying tive ty (Instr. 3	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				

#### Explanation of Responses:

1. These securities are held by EW Healthcare Partners L.P. ("EWHP"). Mr. Eastman is a manager of Essex Woodlands IX, LLC (the "General Partner"), which is the general partner of Essex Woodlands Fund IX-GP, L.P. ("Fund IX-GP"), the general partner that manages EWHP. As manager, Mr. Eastman shares voting and investment powers for EWHP. Mr. Eastman disclaims beneficial ownership of all such securities except to the extent of his pecuniary interest therein.

2. These securities are held by EW Healthcare Partners-A L.P. ("EWHP-A"). Mr. Eastman is a manager of the General Partner, which is the general partner of Fund IX-GP, the general partner that manages EWHP-A. As manager, Mr. Eastman shares voting and investment powers for EWHP-A. Mr. Eastman disclaims beneficial ownership of all such securities except to the extent of his pecuniary interest therein. **Remarks:** 

Ronald W. Eastman by Richard <u>Kolodziejcyk, Attorney-in-Fact</u> <u>for Reporting Person., /s/</u> <u>Richard Kolodziejcyk</u>

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.