FORM 4

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF	CHANGES IN	BENEFICIAL	OWNERSHIP

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

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

1. Name and Address of Reporting Person* <u>DICICCO WENDY F</u>					2. Issuer Name and Ticker or Trading Symbol <u>EyePoint Pharmaceuticals</u> , <u>Inc.</u> [ EYPT ]					(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/05/2024						Officer below)	(give title	Other (s below)	pecify	
C/O EYEPOINT PHARMACEUTICALS, INC. 480 PLEASANT STREET				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person					
(Street) WATER	ГOWN М	ΙA	02472				101.5	4 ( )	<b>-</b>	C 1 1			Form fi Person		han One Repo	ting
(City)	(S		(Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D			saction	Execution Date, if any (Month/Day/Year)   Transaction Code (Instr. 3, 5)   Disposed Of (D) (Instr. 3, 5)   Transaction Code (Instr. 8)   Transaction Code (Instr. 8)   Transaction Code (Instr. 8)   Transaction Code (Instr. 3, 6)   T		ed (A) or tr. 3, 4 and	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		orm: Direct 0) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
		7							uired, Dis , options,				Owned			
Derivative   Conversion   Date				ate,	Transaction Code (Instr. 8) Se Ac (A) Dis		of Ex		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)	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)	\$20.4	01/05/2024			A		25,014		01/05/2025	01/04/2034	Common Stock	25,014	\$0.00	25,014	D	

**Explanation of Responses:** 

Remarks:

/s/ Ron Honig, Attorney-in-Fact 01/09/2024

\*\* Signature of Reporting Person

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

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