FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APP	ROVAL
OMB Number:	3235-02

ОМВ	Number:	3235-0287
	ated average	
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

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* DICICCO WENDY F (Last) (First) (Middle) C/O EYEPOINT PHARMACEUTICALS, INC. 480 PLEASANT STREET (Street) WATERTOWN MA 02472						2. Issuer Name and Ticker or Trading Symbol EyePoint Pharmaceuticals, Inc. [EYPT] 3. Date of Earliest Transaction (Month/Day/Year) 02/09/2023 4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Ir	Relationship of Reporting Person(s) to Issuer check all applicable) X Director 10% Owner Officer (give title below) Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,			,	Transaction Disposed O Code (Instr. 5)			ties Acquired (A) or Of (D) (Instr. 3, 4 and			Benefic	es ially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										Code	/	Amount	(A) or (D)		Price	Transac	nsaction(s) str. 3 and 4)			(111311.4)
Common Stock 02/09/				9/2023	/2023				M		3,000	3,000 A		\$0.00	7	7,400		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. Transaction Code (Instr. 8)		of I		Exp	Date Exer piration E onth/Day/	ate		Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		mount	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title	Nu of	umber					
Restricted Stock Units	\$0.00	02/09/2023			M			3,000		(1)		(1)	Commo	3	3,000	\$0.00	0.00		D	

Explanation of Responses:

1. Fully vested on the one-year anniversary of the grant date.

Remarks:

/s/ Ron Honig, Attorney-in-

02/13/2023

<u>Fact</u>

** 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.