FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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

| Vashington, | D.C. | 20549 |  |
|-------------|------|-------|--|
|-------------|------|-------|--|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |       |  |  |  |  |  |  |  |
|--------------------------|-------|--|--|--|--|--|--|--|
| OMB Number: 3235-0287    |       |  |  |  |  |  |  |  |
| Estimated average burden |       |  |  |  |  |  |  |  |
| 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).

|  |  |            |            |        | Oi  | Secui   | on 30(n) c                   | or trie  | investment          | COI | lipariy Act   | 01 1940         |   |   |  |   |  |                                       |           |  |
|--|--|------------|------------|--------|---|---|------------------------------|--|---------------------|-----|---|-----------------|---|---|--|---|--|---------------------------------------|-----------|--|
| Name and Address of Reporting Person*     Duty Stuart    |  |            |            |        | 2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>EyePoint Pharmaceuticals, Inc.</u> [ EYPT ] |   |                              |  |                     |     |   |                 | Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner |   |  |   |  |                                       |           |  |
| (Last)   |  | irst)      | (Middle)   |        |   | 3. Date of Earliest Transaction (Month/Day/Year) 01/05/2024   |                              |  |                     |     |   |                 |   | А   |  | (give title   |  | Other (s<br>below)                    | ·         |  |
| C/O EYEPOINT PHARMACEUTICALS, INC                        |  |            |            |        | 4.1   | 4. If Amendment, Date of Original Filed (Month/Day/Year)  |                              |  |                     |     |   |                 |   | 6. Individual or Joint/Group Filing (Check Applicable Line) |  |   |  |                                       |           |  |
| 480 PLEASANT STREET                                      |  |            |            |        | -   |   |                              |  |                     |     |   |                 |   | X   | X Form filed by One Reporting Person   |   |  |                                       |           |  |
| (Street) WATER   | ΓOWN M   | ΙA         | 02472      |        |   |   |                              |  |                     |     |   |                 |   |   | Form filed by More than One Reporting<br>Person  |   |  |                                       |           |  |
| (City)   | (9   | itate)     | (Zip)      |        | - R   | Rule 10b5-1(c) Transaction Indication   |                              |  |                     |     |   |                 |   |   |  |   |  |                                       |           |  |
| (Oity)   | (0   | itate)     | (217)      |        |   | Check this box to indicate that a transaction was made pursuant to a satisfy the affirmative defense conditions of Rule 10b5-1(c). See Inst |                              |  |                     |     |   |                 |   |   |  |   |  |                                       |           |  |
|  |  | Tab        | le I - Non | -Deriv | /ativ   | e Se  | curities                     | s Ac   | quired, I           | Dis | posed o   | f, or Be        | nefic   | ially   | Owned  |   |  |                                       |           |  |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D |  |            |            |        | 2A. Deemed<br>Execution Date<br>if any<br>(Month/Day/Yea  |   | Date,                        | Code (Instr.   5)  |                     |     | 4 and Securitie<br>Benefici<br>Owned F  |                 | es Formally (D) (Following (I) (I   |   | m: Direct<br>or Indirect<br>Instr. 4)  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |                                       |           |  |
|  |  |            |            |        |   |   |                              |  | Code                | v   | Amount  | (A) o<br>(D)    | r Pr  | ice   | Transact   | Reported<br>Transaction(s)<br>(Instr. 3 and 4)      |  |                                       | Instr. 4) |  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |            |            |        |   |   |                              |  |                     |     |   |                 |   |   |  |   |  |                                       |           |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)      | ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any  |            | ate,       |        | ransaction of Derivative  |   | ve<br>es<br>d<br>ed<br>nstr. | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                     |     | 7. Title and Amount<br>of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                 |   | B. Price of<br>Derivative<br>Security<br>Instr. 5)          | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | ly  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |           |  |
|  |  |            |            |        | Code  | v   | (A)                          | (D)  | Date<br>Exercisable |     | expiration<br>Date  | Title           | Amo<br>or<br>Num<br>of<br>Shar  | ber   |  |   |  |                                       |           |  |
| Stock<br>Option<br>(Right to<br>Buy)                     | \$20.4   | 01/05/2024 |            |        | A   |   | 25,014                       |  | 01/05/2025          | 5 0 | 1/04/2034   | Common<br>Stock | 25,0  | 014   | \$0.00   | 25,014  |  | D                                     |           |  |

**Explanation of Responses:** 

Remarks:

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

\*\* Signature of Reporting Person Date

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).