## FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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OMB APPROVAL OMB Number: 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

Name and Address of Reporting Person*     Ross Leonard S						2. Issuer Name <b>and</b> Ticker or Trading Symbol  EyePoint Pharmaceuticals, Inc. [ EYPT ]									Check all a Dir V Off	pplicable) ector icer (give title	1	Person(s) to Issuer  10% Owner Other (specify	
	`	HARMACEUTIC	Middle) CALS, IN		3. Date of Earliest Transaction (Month/Day/Year) 10/12/2018									See Remarks					
(Street) WATERTOWN MA 02472 (City) (State) (Zip)				_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Date			Transaction Dis		Disposed	Securities Acquired (A) sposed Of (D) (Instr. 3, 4			nd Sec Ben Owr	mount of urities eficially ed Following orted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(/	A) or O)	Price	Tran	saction(s) r. 3 and 4)			(11341.4)
Common Stock 10.					2/2018				A		20,000	(1)	A \$0.0		00 34,762		D		
Common Stock 10				10/12	/12/2018				F		2,945	2,945 <sup>(2)</sup> D		\$3.	23	31,817	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)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any					Transaction Code (Instr.		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price o Derivative Security (Instr. 5)		Owner Form: Direct or Indi (I) (Ins	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Co		Code	v	(A)	(D)	Date Exercisa	Date Expira		Title	or Num of Shai	ber							

## **Explanation of Responses:**

1. On October 12, 2018 (the "FDA Approval Date"), the U.S. Food and Drug Administration approved EyePoint Pharmaceutical Inc.'s (the "Company") new drug application for YUTIQ for the treatment of chronic non-infectious uveitis affecting the posterior segment of the eye. As a result, 10,000 shares representing a previously granted performance stock unit award vested on that date. An additional 10,000 shares from this award will vest on the first anniversary of the FDA Approval Date, subject to the Reporting Person's continued employment with the Company through the applicable vesting date.

2. No shares were sold - these shares were withheld by the issuer to satisfy tax withholding requirements in connection with the Reporting Person's exercise of his withholding right following the vesting of the performance stock units

Vice President of Finance and Chief Accounting Officer

/s/ John Mercer, Attorney-in-

**Fact** 

\*\* Signature of Reporting Person

10/16/2018

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.