FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. 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 Number: 3235-0287 Estimated average burden 0.5 hours per response:

1. Name and Address Jhaveri Nirav S	1 0		2. Issuer Name and Ticker or Trading Symbol <u>Opus Genetics, Inc.</u> [IRD]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify				
(Last) C/O OPUS GENE 8 DAVIS DRIVE,	· · · · · · · · · · · · · · · · · · ·	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/13/2025	Х	below) Chief Financial	below)		
(Street)	30112 220		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individ	dual or Joint/Group Filing (C	Check Applicable Line)		
DURHAM (City)	NC (State)	27709 (Zip)		Х	Form filed by One Report Form filed by More than 0	Ŭ l		
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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. Transaction Code (Instr. 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
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	03/13/2025		Α		52,500 ⁽¹⁾	Α	\$ <mark>0</mark>	194,293	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)	rivative Conversion		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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)	derivative Securities Beneficially Owned Following Reported	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		Transaction(s) (Instr. 4)		
Employee Stock Option (right to buy)	\$0.93	03/13/2025		A		52,500		(2)	03/12/2035	Common Stock	52,500	\$0	52,500	D	

Explanation of Responses:

1. Represents a grant of restricted stock units which vest in four equal installments on the first, second, third and fourth anniversary of the grant date of March 13, 2025, subject to the Reporting Person's continuing service.

2. The option will vest with respect to 25% on March 13, 2026, with the remaining shares vesting quarterly in 12 equal installments thereafter at the end of each quarter, subject to the Reporting Person's continuing service.

/s/ Amy Rabourn, by Power of	03/17
<u>Attorney</u>	05/17
** Signature of Reporting Person	Date

Signature of Reporting Person

7/2025

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.