FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPR	OVAL				
OMB Number:	3235-0287				
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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 OF SECURITIES

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

(Print or Ty	pe Response	es)														
Name and Address of Reporting Person - MANUSO JAMES S J				Issuer Name and Ticker or Trading Symbol Ocuphire Pharma, Inc. [OCUP]							Relationship of Reporting Person(s) to Issuer (Check all applicable) X _ Director					
(Last) (First) (Middle) C/O OCUPHIRE PHARMA, INC., 37000 GRAND RIVER AVE, SUITE 120				3. Date of Earliest Transaction (Month/Day/Year) 06/13/2022								e title below)	Oth	er (specify below	v)	
(Street) FARMINGTON HILLS, MI 48335			4. If Amendment, Date Original Filed (Month/Day/Year)						_X_	6. Individual or Joint/Group Filing (Check Applicable Line)X_Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(Cit	ty)	(State)	(Zip)		Table I - Non-Derivative Securities Acquired, D						ed, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year) any	emed ion Date /Day/Ye	ar)		8)	(A) or Di	rities Acq isposed (4 and 5) (A) or (D)	of (D) Own Tran	(D) Owned Following Reportant Transaction(s) (Instr. 3 and 4)		•		7. Nature of Indirect Beneficial Dwnership Instr. 4)
								this fo curren	orm are on the state of the sta	not requ d OMB c i, or Ben	ired to respontrol num	oond unles ber.		contained ir displays a	SEC I	174 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	2. 3. Transaction Gonversion Date Exercise Price of Derivative 3. Transaction Date Execution Date, if any (Month/Day/Year)		4. 5. Number Transaction of Derivative Code Securities			Expiration Date of Unc (Month/Day/Year) Securi				le and Amount derlying Berivativ Security		of 9. Number of e Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownership Form of Derivative Security: Direct (D) or Indirect s) (I)	(Instr. 4)	
				Code	V	A) ((D)	Date Exercisab	Expirate Date	ation	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option (right to buy)	\$ 1.93	06/13/2022		Α	20	,000		(1)	06/1	2/2032	Commor Stock	20,000	\$0	20,000	D	

Reporting Owners

Donation Common Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
MANUSO JAMES S J C/O OCUPHIRE PHARMA, INC. 37000 GRAND RIVER AVE, SUITE 120 FARMINGTON HILLS, MI 48335	х						

Signatures

/s/ Emily J. Johns, by Power of Attorney	06/15/2022
-Signature of Reporting Person	Date

Explanation of Responses:

- * 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).

(1) Will vest upon the earlier of the one (1) year anniversary of the grant date or the day prior to the Issuer's next annual meeting of stockholders occurring after the grant date, subject to the Reporting Person's continuing service through the vesting date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.