FORM 4

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

OMB APPF	ROVAL
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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

	pe Response															
Name and Address of Reporting Person - Gallagher Cam			Issuer Name and Ticker or Trading Symbol Ocuphire Pharma, Inc. [OCUP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_ Director10% Owner								
	/	(First) HARMA, INC., 3 E 120	(Middle) 37000 GRAND	3. Date of Earliest Transaction (Month/Day/Year) 06/13/2022			-	Officer (give	e title below)	Oti	ner (specify below	v)				
FARMIN	IGTON HIL	(Street) LLS, MI 48335		4. If Ame	endment, [ate Or	iginal Filed	Month/Day/Year)		X_ Form filed by	One Reporting	Person Reporting Person)		
(Cit	ty)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year	Execution (ecution Date, if		. 8)	4. Securities Acc (A) or Disposed (Instr. 3, 4 and 5 (A) or Amount (D)	osed of (D) Owned Following Reported Transaction(s) (Instr. 3 and 4) Owned Following Reported Form: Direct (or Indirect) (I)		sposed of (D) 4 and 5) Owned Following Reported Transaction(s) (Instr. 3 and 4)		Owned Following Reported Transaction(s) (Instr. 3 and 4) Ovaluation (instr. 3 and 4)		Ownership of Form: I Direct (D) or Indirect (D)	7. Nature of Indirect Beneficial Dwnership Instr. 4)
			Table II - I		e Securition	es Aca	currer	rm are not requitly valid OMB o			55 tile 10111	i uispiays a				
	Conversion Date Execution Date, or Exercise (Month/Day/Year) any		(ea nute	calls w			osed of, or Ben		Owned						
1. Title of Derivative Security (Instr. 3)	or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if	4. Transact Code	5. Nui of Dei Secur	nber ivative ities red (A) posed	6. Date Expiration (Month/Da	convertible secu ercisable and Date	urities)	and Amount rlying		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	Ownersh Form of Derivative Security: Direct (D or Indirect	(Instr. 4)		
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transact Code	5. Num of Der Secur Acqui or Dis of (D) (Instr.	nber ivative ities red (A) posed	e, options, of the control of the co	econvertible sections and Date sy/Year)	7. Title and of Underland Securities	and Amount rlying	Derivative Security	Derivative Securities Beneficially Owned Following Reported	Ownersh Form of Derivativ Security: Direct (D or Indirect	of Indirect Beneficia Ownersh (Instr. 4)		

Reporting Owners

Barrantina Coman Nama / Addusa	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Gallagher Cam 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.