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

OMB APPE	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

1. Name and Address of Reporting Person Sooch Mina (Last) (First) (Middle) C/O OCUPHIRE PHARMA, INC., 37000 GRAND RIVER AVE, SUITE 120 (Street) FARMINGTON HILLS, MI 48335 (City) (State) (Zip)			2. Issuer Name and Ticker or Trading Symbol Ocuphire Pharma, Inc. [OCUP] 3. Date of Earliest Transaction (Month/Day/Year) 09/06/2022 4. If Amendment, Date Original Filed(Month/Day/Year) Table I - Non-Derivative Securities Acqui							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
										A Officer (give title below) Other (specify below) President and CEO 6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
)		
									es Acquir							
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y			any	Deemed		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securit Owned Following Re Transaction(s)		ecurities Be	neficially 6	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial	
				(Wollul)	Day/1ea		ode V	Amount	(A) or (D)	Price	,		(Direct (D) Ownership or Indirect (Instr. 4) (Instr. 4)		
Common	Stock		09/06/2022				X	1,023	A \$	5 0.0001	426,0)45		I)	
Reminder:	Report on a s	separate line for eacl	n class of securities b				Perso in thi a cur	ons who s form a ently va	re not re alid OME	equired t 3 control	to res I num	pond u ber.		on contained form display		1474 (9-02)
Reminder:	Report on a s	separate line for each	n class of securities b	eneficially	y owned	directly	Perso in thi	ns who s form a	re not re	equired t	to res	pond u				1474 (9-02)
	2. Conversion	3. Transaction	Table II 3A. Deemed Execution Date, if	- Derivati (e.g., put 4. Transactio Code	ive Secu ts, calls, 5. Nu on of	rities A warran	Perso in thi	ons who is form a rently various of convertile cisable and the convertible cisable cis	re not re alid OME , or Bene ble securi	equired t 3 control ficially O	wned and A lerlying	Amount	8. Price of		10.	11. Nat of India Benefic ve Owners
Title of Derivative Security	2. Conversion or Exercise Price of	3. Transaction Date	Table II 3A. Deemed Execution Date, if any	- Derivati (e.g., put 4. Transactio Code	ive Secu ts, calls, 5. No on Deriv Secu Acqu (A) c Disp of (D	rities A warrar umber vative rities nired or osed) r. 3, 4,	Persoin thin a cur cquired, Distats, options, 6. Date Exeres Expiration I	ons who is form a rently various of convertile cisable and the convertible cisable cis	re not re alid OME , or Bene ble securi	ficially O ities) 7. Title of Und- Securit	wned and A lerlying	Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially	10. Owners Form of Derivati Security Direct (or Indire	11. Nat of Indir Benefic Owners : (Instr. 2
Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II 3A. Deemed Execution Date, if any	- Derivati (e.g., put 4. Transactic Code (Instr. 8)	ive Secu ts, calls, 5. No of Deriv Secu Acqu (A) c Disp of (D (Instr	rities A warrar umber vative rities nired or osed) r. 3, 4,	Persoin thin a cur cquired, Distats, options, 6. Date Exeres Expiration I	ons who is form a rently va posed of convertil cisable a late Year)	re not re alid OME , or Bene ble securi	equired to a control officially O	I num wned e and A errying eies 3 and 4	Amount	8. Price of Derivative Security	9. Number or Derivative Securities Beneficially Owned Following Reported Transaction(Owners Form of Derivati Security Direct (or Indirect) (I)	11. Nat of Indir Benefic Owners : (Instr. 2

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Sooch Mina C/O OCUPHIRE PHARMA, INC. 37000 GRAND RIVER AVE, SUITE 120 FARMINGTON HILLS, MI 48335	X		President and CEO			

Signatures

/s/ Stephanie Swan, by Power of Attorney	09/08/2022
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) The expiration date of the Series B Warrants occurred on the later of (x) the Reservation Date (as defined in the Series B Warrants) and (y) the date on which the Series B Warrant has been exercised in full.

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.