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

Name and Address of Reporting Person * Benton Susan			2. 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							
(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						0	Officer (give	e title below)	Oth	er (specify below)		
(Street) FARMINGTON HILLS, MI 48335			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person							
(Cit		(State)	(Zip)	Table I - Non-Derivative Securities Aca				ies Acau	uired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y			any	on Date, if	3. Tra Code (Instr.	nsaction 4	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		eneficially d	5. 7 Ownership of B	Nature f Indirect eneficial		
				(Month	/Day/Year	Coo	ie V A	(A) c	r Price	(Instr. 3 and 4)		or In (I)		Oirect (D) Ownership or Indirect (Instr. 4)	
Reminder:							in this	s who respo form are not s a currently	require	d to re	espond	unless the		ed SEC 14	74 (9-02)
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1. Title of Derivative	Conversion		3A. Deemed Execution Date, if	4. Transac	5. Nu tion of De	arrants mber rivative	uired, Disposonos, contions, contions, contions, contions, contions, contions, continuous and co	form are not s a currently osed of, or Be onvertible securitisable and Date	require valid C neficially prities) 7. Title of Unc	Owned and A	espond ontrol n	8. Price of Derivative	9. Number of Derivative	f 10. Ownershij	11. Natur
1. Title of		Date	3A. Deemed Execution Date, if	4. Transac Code	5. Nu of De Secur Acqu	mber rivative ities rred (A) sposed	in this display uired, Display, options, co	form are not s a currently osed of, or Be onvertible securitisable and Date	require valid Coneficially rrities) 7. Title of Und Securi	Owned and A	espond ontrol n ed Amount	unless the umber.	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	f 10. Ownership Form of Derivative Security: Direct (D) or Indirect s) (I)	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	5. Nu for De Secur Acqu or Di of (D (Instr	mber rivative ities red (A) sposed	in this display uired, Display, options, co	form are not s a currently used of, or Be envertible secretisable and Date y/Year)	require valid Coneficially rrities) 7. Title of Und Securi	d to re OMB co Owned e and A derlying ties 3 and 4	espond ontrol n ed Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	f 10. Ownershij Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Benton Susan						
C/O OCUPHIRE PHARMA, INC.	X					
37000 GRAND RIVER AVE, SUITE 120	Λ					
FARMINGTON HILLS, MI 48335						

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.