## FORM 4

## UNITED

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washingto

STATES SECURITIES AND EXCHANGE COMMIS	SION
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on, D.C. 20549	OMB APPROVAL

l	OMB Number:	3235-0287
l	Estimated average burder	1
l	hours per response:	0.5

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

Name and Address of Reporting Person*     Qamar Huma					2. Issuer Name and Ticker or Trading Symbol Ocugen, Inc. [ OCGN ]								(Chec	Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director					
(Last) (First) (Middle) C/O OCUGEN, INC. 11 GREAT VALLEY PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 01/02/2025									Officer (give title Other (specify below)  Chief Medical Officer					
(Street)  MALVE  (City)		A State)	19355 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indi	idividual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person							
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transz Date (Month/L				ate	2A. Deemed Execution Date if any (Month/Day/Year		e, Transaction Dispose Code (Instr.		urities Acquired (A) or led Of (D) (Instr. 3, 4 and 5			5. Amount Securities Beneficiall Owned Fol Reported	Form: (D) or		Direct I Indirect I tr. 4)	'. Nature of ndirect Beneficial Ownership			
				Code V Amount (A) or (D) Price			Price	Transaction(s) (Instr. 3 and 4)			1	Instr. 4)							
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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	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)		9	7. Title and Amo Securities Unde Derivative Secu (Instr. 3 and 4)		erlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Followin Reported Transact	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
Code					v	(A)	(D)	Date Exercisa		Expiration Date	Title		ount or ober of res		(Instr. 4)				
Option (Right to Buy)	\$0.9	01/02/2025		A		1,145,468		(1)		01/02/2035	Commor Stock	1,1	45,468	\$0	1,145,	468	D		

## **Explanation of Responses:**

1. The option vests annually in equal installments over three years commencing on January 2, 2026, subject to continued service with the Issuer on the applicable vesting dates.

/s/ Huma Qamar by Shankar Musunuri, her attorney-in-fact

01/06/2025

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.