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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

1	Check this box if no longer subject to
L	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
4	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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer Vazzano Joseph Walter ABEONA THERAPEUTICS INC. [ABEO] 5. Relationship of Reporting Person(s) to Issuer (Last) (First) (Middle) 6555 CARNEGIE AVE, 4TH FLOOR Officer (give title Other (specify below) (Street) . If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) (City) (State) (Zip) (Zip)			Table I - Non-	Derivative Securities Acquired, Disposed of, or Benefic	cially Owned
Main and reaction of repending reaction ABEONA THERAPEUTICS INC. [ABEO] (Check all applicable) Vazzano Joseph Walter 3. Date of Earliest Transaction (Month/Day/Year) Director 10% Owner 3. Date of Earliest Transaction (Month/Day/Year) 01/21/2025 Officer (give title Other (specify below) 6555 CARNEGIE AVE, 4TH FLOOR 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) (Street) X Form filed by One Reporting Person	(City)	(State)	(Zip)		
Vazzano Joseph Walter ABEONA THERAPEUTICS INC. [ABEO] (Check all applicable) 0.1/21/2025 0.1/21/2025 Director 10% Owner X Officer (give title below) Other (specify below)	· ,	ОН	44103	4. If Amendment, Date of Original Filed (Month/Day/Year)	X Form filed by One Reporting Person
Vazzano Joseph Walter ABEONA THERAPEUTICS INC. [ABEO] (Check all applicable) 3. Date of Earliest Transaction (Month/Day/Year) Director 10% Owner Vazzano Joseph Walter 01/21/2025 Officer (give title	6555 CARNEGI	E AVE, 4TH I	FLOOR		Chief Financial Officer
Vazzano Josenh Walter ABEONA THERAPEUTICS INC. [ABEO] (Check all applicable)	(Last)	(First)	(Middle)		V Officer (give title Other (specify
				3 <i>y</i>	(Check all applicable)

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquir Transaction Disposed Of (D) (Inst. 8) 6			4 and 5)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
			Code	v	Amount (A) or (D) Price		Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common stock	01/21/2025		A		144,509(1)	A	\$0.00	509,726	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Deriv	de of vative irity (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. Transac Code (Ir 8)		Derivative Expir		6. Date Exercisable and Expiration Date (Month/Day/Year)				8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

Explanation of Responses:

1. The restricted stock will vest one-third on each of January 21, 2026, January 21, 2027 and January 21, 2028.

/s/ Jose	ph Vazzano	

** Signature of Reporting Person

01/23/2025 Date

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

* 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.