FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB	APP	RO\	/AI

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).

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

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

affirmative defense 10b5-1(c). See Instr						
1. Name and Address <u>Vazzano Josep</u>			2. Issuer Name and Ticker or Trading Symbol ABEONA THERAPEUTICS INC. [ABEO]		ntionship of Reporting Person all applicable) Director	on(s) to Issuer
(Last) 6555 CARNEGIE	(First) AVE., 4TH FLOOF	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 07/09/2025	X	Officer (give title below) Chief Financia	Other (specify below)
(Street) CLEVELAND (City)	OH (State)	44103 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	ridual or Joint/Group Filing Form filed by One Repo Form filed by More than	orting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) (Month/Day/Year) 2. Deemed Execution Date if any (Month/Day/Ye				4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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	07/09/2025		S ⁽¹⁾		25,411	D	\$5.8557(2)	479,168	D	

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

-1	1. Title of	2.	3. Transaction	3A. Deemed	4.				6. Date Exercisable and		7. Title and Amount of		8. Price of	9. Number of	10.	11. Nature	ı
-1	Derivative	Conversion	Date	Execution Date,	Transaction		Derivative		Expiration Date		Securities Underlying		Derivative	derivative	Ownership	of Indirect	L
-1	Security (Instr. 3)	or Exercise	(Month/Day/Year)	if any	Code (Instr.		Securities		(Month/Day/Year)		Derivative Security		Security	Securities	Form:	Beneficial	L
-1		Price of		(Month/Day/Year)	8)	8) Acquired (A)		(Instr. 3 and		Instr. 3 and 4) (Instr. 5)		Beneficially	Direct (D)	Ownership	L		
-1		Derivative			or Disposed of		ı İ				Owned	or Indirect	(Instr. 4)	L			
-1		Security			(D) (Instr. 3, 4		3, 4				Following	(I) (Instr. 4)		L			
-1					and 5)		·					Reported			L		
-1													1	Transaction(s)			L
-1						l						Amount		(Instr. 4)			L
-1						l						or					1
-1						l			Date	Expiration		Number					1
1					Code	٧	(A)	(D)	Exercisable	Date	Title	of Shares					

Explanation of Responses:

- 1. The sale reported in this Form 4 was to cover tax obligations associated with the vesting of restricted stock awards.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$5.78 to \$5.92 inclusive. The reporting person undertakes to provide the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth above.

/s/ Joseph Vazzano

07/10/2025

** Signature of Reporting Person

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.