FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-028									
F-4:	la									

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol Eleven Biotherapeutics, Inc. [EBIO]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Celniker Abbie					1	Eleven biomerapeutics, inc. [EbiO]									X Dire		ctor	10% O		vner	
(Last)	(F	irst) (Middle)		3. D	Date of Earliest Transaction (Month/Day/Year)										Offic belov	er (give title v)		her (s low)	specify	
C/O ELEVEN BIOTHERAPEUTICS, INC.,						12/28/2015									President and CEO						
215 FIRST STREET, SUITE 400																					
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)	IDGE N		2242												X Form filed by One Reporting Person						
CAMBR	IDGE M	IA ()2142												21	Form filed by More than One Reporting					
(City)	(S	tate) (Zip)													Person					
(0.0)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Acc	quired	, Dis	posed o	f, o	r Ben	efici	ally	Owne	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,						ies Acquired (A) Of (D) (Instr. 3, 4			and 5) See Be		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										v	Amount		(A) or (D)	Price	:	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 12/28/2						/2015			S		10,155(1)		(1) D \$2		⁽⁵⁽²⁾ 429,975		29,975	D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
				(e.g., pı	uts, c	alls,	warr	ants,	optio	ns, c	onvertib	le s	securi	ties)							
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Security or Exercise (Month/Day/Year) Execution Date, if any				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)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			Deri Secu	Price of ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	hip (E) (ect (11. Nature of Indirect Beneficial Ownership (Instr. 4)	
		Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Titl	or Nui of	ount mber ares										

Explanation of Responses:

- 1. The shares of common stock underlying the restricted stock units reported as disposed herein were sold by the issuer in satisfaction of tax withholding obligations associated with the vesting of such units.
- 2. Represents the weighted average sales price for shares sold in multiple transactions. Sales prices ranged from \$2.80 to \$2.95 per share. Upon request of the staff of the Securities and Exchange Commission, the issuer or a security holder of such issuer, the reporting person will provide full information regarding the number of shares sold at each separate price.

Remarks:

/s/ John J. McCabe as attorney-12/30/2015 in-fact

** 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.