FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden 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)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

				0	or Secti	ion 30(n) (or tne	investment C	ompany Act	01 1940						
1. Name and Address of Reporting Person* WOOD BARBARA A					2. Issuer Name and Ticker or Trading Symbol Ophthotech Corp. [OPHT]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) C/O OPHTHOTECH CORPORATION ONE PENN PLAZA, 19TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 01/02/2015						:	X Officer below)	(give title	ounse	Other (specify below)	
(Street) NEW Y(10119 (Zip)	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	Y Form f Form f	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tah	ole I - Non-De	rivativ	/e Se	curities	- Δα	auired Di	enosed o	of or Rei	neficiall	v Owned	1			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			ansactio	action 2A. Deemed Execution Date,		3. Transaction	4. Securi	ties Acquire d Of (D) (Ins	ed (A) or	5. Amou Securitie Beneficia Owned F	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct of Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
								Code V	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ction(s)			(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		3A. Deemed Execution Date, if any (Month/Day/Year)	Code	action (Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	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					
Stock Option (Right to Buy)	\$45.6	01/02/2015		A		22,500		(1)	01/01/2025	Common Stock	22,500	\$0.00	22,500		D	
Restricted Stock Units	(2)	01/02/2015		A		5,500		(3)	01/01/2025	Common Stock	5,500	\$0.00	22,500		D	

Explanation of Responses:

- 1. Subject to continued employment with the Registrant and the other terms and conditions under the Registrant's 2013 Stock Incentive Plan, each of these stock option awards will vest with respect to 25% of the shares subject to the option on the first anniversary of the grant date and with respect to the remaining shares in approximately equal monthly installments through the fourth anniversary of the grant date.
- 2. Each restricted stock unit represents the contingent right to receive one share of common stock upon vesting of the unit.
- 3. Subject to continued employment with the Registrant and the other terms and conditions under the Registrant's 2013 Stock Incentive Plan, each of these Restricted Stock Unit awards will vest with respect to 25% of the shares subject to the award on each of the first, second, third and fourth anniversaries of the grant date.

/s/ Justin Vogel, as Attorney-in-01/06/2015 Fact for Barbara Wood

** 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.