FC	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									SION	OMB APPROVAL				
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).				MENT 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								OMB Number: 3235-0287 Estimated average burden hours per response: 0.5			
1. Name and Address of Reporting Person [*] <u>Huang Andong</u>				2. Issuer Name and Ticker or Trading Symbol Outlook Therapeutics, Inc. [OTLK]						(Checl	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last)	(First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/29/2023							Officer (give title Other (specify below) below)				
C/O OUTLOOK THERAPEUTICS, INC. 485 ROUTE 1 SOUTH, BUILDING F, SUITE 320				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indi Line) X	, , , , , , , , , , , , , , , , , , ,				
(Street) ISELIN NJ 08830											Form filed by More than One Reporting Person				
(City)	(State)	(Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									ed to		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
Date			2. Transad Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Follow	F (I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount	(A) or (D)	Price	Reported Transaction(s (Instr. 3 and 4			(Instr. 4)	
					curities Acqui Ils, warrants, d						wned				

11. Nature of Indirect Beneficial Ownership 1. Title of Derivative Security (Instr. 3) 3. Transaction Date (Month/Day/Year) 5. Number of Derivative 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security 9. Number of derivative Securities Beneficially 3A. Deemed Execution Date, 8. Price of Derivative 10. Ownership Form: Direct (D) 2. Conversion or Exercise Price of 4. Transaction Code (Instr. 8) Security (Instr. 5) if any (Month/Dav/Year) Securities Owned Following Reported Transaction(s) (Instr. 4) Acquired (A) or Disposed Derivative Security (Instr. 3 and 4) or Indirect (I) (Instr. 4) (Instr. 4) of (D) (Instr. 3, 4 and 5) Amount or Number Date Expiration of Code ۷ (A) (D) Exercisable Date Title Shares Stock Option \$1.05 03/29/2023 41,065 (1) 03/29/2033 Common 41,065 \$0.00 41,065 D A (Right to Buy) Stock

Explanation of Responses:

1. The options were granted under the Issuer's 2015 Equity Incentive Plan (the "2015 Plan") and shall fully vest on the earlier of (i) March 29,2024; or (ii) the date of the Issuer's next annual meeting of stockholders, in each case subject to the Reporting Person providing continuous service to the Issuer on such date. In addition, the shares underlying the options are subject to acceleration upon a Change in Control as defined in the 2015 Plan, subject to the Reporting Person providing continuous service to the Issuer immediately prior to such Change in Control.

Remarks:

SEC Earner 4

/s/ Lawrence Kenyon, Attorney-in-Fact

03/31/2023

** 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.