FORM	4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)										
1. Name and Address of Reporting Person + 2. Issuer Name and Ticker or Trading Syn Miller Robert E Oculus Innovative Sciences, Inc. [OC			· ·			5. Relationship of Reporting Person(s (Check all applica Director 10					
1129 N. MCDOWEI	L BLVD.		3. Date of Earliest Transaction (Month/Day/Year) 03/04/2014					X_Officer (give title below) Other (specify below) Chief Financial Officer			
(Street) PETALUMA, CA 94954			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Chd _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		ine)	
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if	(Instr. 8)	tion	4. Securi (A) or D (Instr. 3,	isposed o	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		7. Nature of Indirect Beneficial Ownership
				Code	V	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	1
Reminder: Report on a s	eparate line for eac	h class of securities	beneficially owned	directly or i	ndire	ctly.					

minder: Report on a separate line for each class of securities beneficially owned directly or	indirectly.		
	Persons who re	spond to the collection of information	SEC 1474 (9-02)
	contained in this	s form are not required to respond unless the	

form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numbe	r of	6. Date Exer	cisable and	7. Title and	Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	insaction Derivative		Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code	e Securities		(Month/Day/Year)		Securities		Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	nstr. 8) Acquired (A)		(Instr. 3 and 4)		d 4)	(Instr. 5)	Beneficially	Derivative	Ownership		
	Derivative				or Disposed				Owned	Security:	(Instr. 4)				
	Security			of (D)					Following	Direct (D)					
						(Instr. 3, 4	ŀ,						· · · · · ·	or Indirect	
						and 5)							Transaction(s)	< / .	
											Amount		(Instr. 4)	(Instr. 4)	
								Date	Expiration	Title	or				
								Exercisable	Date		Number				
				Code	V	(A)	(D)				of Shares				
Stock															
Option										Common				_	
(Right to	\$ 3.9	03/04/2014		A		130,105		<u>(1)</u>	03/04/2024	Common Stock	130,105	<u>(2)</u>	247,435	D	
										STOCK					
Buy)															

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Miller Robert E 1129 N. MCDOWELL BLVD. PETALUMA, CA 94954			Chief Financial Officer					

Signatures

/s/ Robert E. Miller	03/06/2014
Signature of Reporting Person	Date

Explanation of Responses:

* 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).

(1) The option will vest 1/36th per month over a three year vesting schedule commencing on the date of grant.

(2) The option was granted by the Issuer as compensation in lieu of cash.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.