FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

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

Name and Address of Reporting Person* Busquet Jacques J					2. Issuer Name and Ticker or Trading Symbol OCWEN FINANCIAL CORP [OCN] 3. Date of Earliest Transaction (Month/Day/Year)								(Ched	5. Relationship of Reporting Person(s) to l (Check all applicable) X Director 10% Officer (give title Other (wner			
(Last) (First) (Middle)					05/23/2023									belov			below)	эрсспу			
1661 WORTHINGTON ROAD, SUITE 100					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ind	6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street)															X Form filed by One Reporting Person						
WEST P. BEACH	WEST PALM BEACH FL 33409												Form filed by More than One Reporting Person								
						Rule 10b5-1(c) Transaction Indication															
(City)	(St	ate) (Z	Zip)		Check this box to indicate that a transaction was n satisfy the affirmative defense conditions of Rule 1											truction or wr	itten pla	an that is int	ended to		
		Table	l - No	n-Deriva	tive S	ecur	ities	Acq	uired,	Dis	osed of	f, or	Bene	ficial	y Owr	ned					
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				y/Year) Execu		Deemed cution Date, y nth/Day/Year)		Transaction Disposed Code (Instr. and 5)		ties Acquired (A I Of (D) (Instr. 3,			Securi Benefi Owned Follow	cially I ring	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A (D) or [Price		rted saction(s) . 3 and 4)					
Common Stock 05/23/2					2023				A		4,424(1)	(1) A		\$ <mark>0</mark>	40,218(2)			D			
	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)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any			tion Date,	4. Transaction Code (Instr. 8)		5. Numl of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed	Expiration	ate Exercisable and ration Date nth/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amou or Numb of Share	ber							

Explanation of Responses:

- 1. Consists of restricted stock units representing a contingent right to receive one share of OCN common stock for no additional consideration (RSUs). The RSUs will vest May 23, 2024, subject to certain conditions relating to the reporting person's service as a director of the issuer, and the underlying shares of common stock will be delivered on May 23, 2024.
- 2. Includes 1,000 shares held jointly with spouse.

/s/ Leah E. Hutton, Attorneyin-Fact for Jacques J. Busquet 05/25/2023

** 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.