FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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STATEMENT (	OF (	CHANGES	IN	BENEFICIAL	OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Campbell June C</u>					2. Issuer Name and Ticker or Trading Symbol OCWEN FINANCIAL CORP [ OCN ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specifications))						
(Last) 1661 W(	•	rst) (	(Middle) ITE 100			3. Date of Earliest Transaction (Month/Day/Year) 03/10/2022									below)		Financ	below)		
(Street) WEST P	ALM FI	. ;	33409		4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	6. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																	
		Tab	le I - Nor	า-Deriv	/ative	e Se	curiti	ies Ac	quire	l, Dis	posed	of, c	or Bei	neficial	ly Owned	k				
Date		Date			2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		n Dispos	4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		ed (A) or tr. 3, 4 and	Benefici	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
										Code V		Amount (A		Price	Transaci (Instr. 3	tion(s)			(Instr. 4)	
Common Stock <sup>(1)</sup> 03/1			03/10	0/202	/2022		М		5,5	92	Α	(2)	11,	11,080		D <sup>(3)</sup>				
Common	Stock <sup>(1)</sup>			03/10	0/202	/2022 D 5,592 D			(2)	5,488			D <sup>(3)</sup>							
		Т	able II -								osed c				Owned					
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)  3. Deemed Execution I if any (Month/Day		Date,	Code (Inst		ion of		6. Date Expirat (Month	on Dat		Am Sec Und Der	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis		Expiratior Date	Title	e	Amount or Number of Shares						
Restricted Stock	(1)	03/10/2022			M			5,592	(1)		(4)		nmon tock	5,592	\$0	0		D		

## **Explanation of Responses:**

- 1. On September 10, 2020, the reporting person was granted 5,592 restricted stock units scheduled to vest on March 10, 2022, subject to the reporting person's continued employment on the vesting date and certain other conditions. Each restricted stock unit represents a contingent right to receive a cash payment equal to the closing price of one share of OCN common stock on the applicable vesting date.
- 2. The transactions reported on this Form 4 reflect the settlement in cash pursuant to the terms of the award of 5,592 restricted stock units that vested pursuant to the award on March 10, 2022. On March 10, 2022, the closing price of OCN common stock was \$24.97.
- 3. Includes 3,176 shares held jointly with spouse.
- 4. Not applicable.

/s/ Leah E. Hutton, Attorneyin-Fact for June C. Campbell

03/14/2022

\*\* 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.