FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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>Dondzila Catherine M</u>					2. Issuer Name and Ticker or Trading Symbol OCWEN FINANCIAL CORP [OCN]						(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner V Officer (give title Other (specif					
(Last) (First) (Middle) 1661 WORTHINGTON ROAD SUITE 100					3. Date of Earliest Transaction (Month/Day/Year) 03/29/2016							X Officer (give title Other (specify below) SVP & Chief Accounting Officer					
(Street) WEST P. BEACH	ALM FI	L	33409	4	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	dividual or Joint/Group Filing (Check Applicable) Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date			. Transactio Pate Month/Day/	Execution Date,			Code (Instr. 5)				Beneficia	es ally Following	6. Owne Form: D (D) or In (I) (Instr	Direct of Direct Endirect Er. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code V	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			msu. 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)	Conversion Date Execution or Exercise (Month/Day/Year) if any		3A. Deemed Execution Dat if any (Month/Day/Ye	Date, Transaction				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y O' Fo Oi (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	e V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Restricted Stock Units	(1)	03/29/2016		A		36,000		(2)	03/29/2019	Common Stock	36,000	\$0	36,000		D		
Restricted Stock	(1)	03/29/2016		A		47,500		(3)	03/29/2020	Common	47,500	\$0	47,500		D		

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of OCN Common Stock.
- 2. The restricted stock units are scheduled to vest in three equal annual installments on the first, second, and third anniversaries of the transaction date reported above.
- 3. If, on or before the fourth anniversary of the transaction date reported above, the average of the closing prices per share of OCN Common Stock for a period of twenty consecutive trading days, plus the amount of any dividends paid on a share of OCN Common Stock during the term of the award on or before the last day of that period, equals or exceeds \$4.78, the restricted stock units will vest in four equal annual installments on the first, second, third and fourth anniversaries of the transaction date reported above (in each case, if such date occurs before the date that the stock price-based vesting condition is satisfied, the vesting of that installment will occur on the satisfaction of the stock price-based vesting condition).

/s/ Timothy M. Hayes,

Attorney-in-Fact for Catherine 03/31/2016

M. Dondzila

** 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.