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

Vashington, D.	C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL										
OMB Number:	3235-0287									
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					or	Sectio	n 30(l	h) of the	Ínvesti	ment (Com	npany Act	of 194	40								
Name and Address of Reporting Person* Anderson Scott William					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							
(Last) (First) (Middle) 1661 WORTHINGTON ROAD, SUITE 100					04/	3. Date of Earliest Transaction (Month/Day/Year) 04/03/2024										X Officer (give title Other (specification) EVP & Chief Servicing Officer						
(Street) WEST PALM BEACH FL 33409					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)											Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person 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											
		Tab	le I - No	n-Deriv	/ative											ly Owne	d					
Date				Date	Date Ex (Month/Day/Year) if a		2A. Deemed Execution Date, f any Month/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3,			5) Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
									Cod	e V		Amount	(A (1	A) or D)	Price	Transa				(Instr. 4)		
Common Stock 04/				04/03	/2024			M			3,506		A (1)		27,668			D				
Common Stock 04/0				04/03	/2024				F 1,3		1,380 D ⁽²⁾		\$24.8	84 26,288		D						
		T	able II -									osed of onverti				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	Date,	4. Transaction Code (Instr. 8)				6. Date Exercis Expiration Date (Month/Day/Yea				7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e los	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A) (D)		Date Exerci	sable		xpiration ate	Title	0	Amount or Number of Shares							
Restricted	(1)	04/02/2024			М			2 506	(1	,		(3)	Com	non	3 506	60	7.013		D			

Explanation of Responses:

- 1. On April 3, 2023, the reporting person was granted 10,518 restricted stock units scheduled to vest in three approximately equal annual installments on the first, second, and third anniversaries of grant, subject to the reporting person's continued employment and certain other conditions. Each restricted stock unit represents a contingent right to receive one share of OCN common stock on the vesting date.
- 2. Shares withheld pursuant to terms of the award to cover tax withholding obligations.
- 3. Not applicable.

Units

/s/ Leah E. Hutton, Attorneyin-Fact for Scott Anderson

04/05/2024

** 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.