FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
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	Check this box if no longer subject
	to Section 16. Form 4 or Form 5
\Box	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(b) of the Investment Company Act of 1940

							(, .		iivestiiieii					_						
Name and Address of Reporting Person* Schlaeppi Yvonne				2. Issuer Name and Ticker or Trading Symbol OPGEN INC [OPGN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
<u>Schaeppi Tvomic</u>														- X	Direc	tor		10% Ow	vner	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/07/2023									Office	er (give title w)		Other (s below)	specify		
C/O OPGEN, INC. 9717 KEY WEST AVE., SUITE 100					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Ind	6. Individual or Joint/Group Filing (Check Applicable Line)					
														X	X Form filed by One Reporting Person					
(Street)	(Street) ROCKVILLE MD 20850														Form filed by More than One Reporting Person					
,						Rule 10b5-1(c) Transaction Indication														
(City)	(S	ate) (Z	Zip)		(-,															
(0.5)	(5.5) (State) (Ep)						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.													
		Table	I - No	n-Deriva	tive S	ecur	ities	Acq	uired,	Dis	oosed of	f, or I	Bene	ficial	y Owr	ned				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution			Oate,	Transaction Disposed Code (Instr. 5)		ties Acquired (d Of (D) (Instr. 3		(A) or 3, 4 and	Securi Benefi Owned Follow	5. Amount of Securities Beneficially Dwned Following		Direct C E t (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or F	Price		ted action(s) 3 and 4)				
Common Stock ⁽¹⁾ 06/07/2					2023				A		1,500	,500 A		\$0.00	3,	3,000(2))		
	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)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		tion Date,	4. Transaction Code (Instr. 8)				6. Date Exercisable a Expiration Date (Month/Day/Year)		te	d 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Ov Fo Dii or (I)	wnership orm: rect (D) Indirect (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Expiration Exercisable Date Ti		Title	Amou or Numl of Share	ber							

Explanation of Responses:

- 1. Represents an award of restricted stock units vesting on the first anniversary of the date of grant, or if earlier, the date of the 2024 annual meeting of stockholders, subject to acceleration and vesting if the director leaves the Board of Directors in connection with a change in control of OpGen, Inc. (the "Company").
- 2. The number of restricted stock units and shares reflects the application of the twenty-for-one reverse stock split effected by the Company on January 5, 2023.

/s/ Oliver Schacht, attorney-

06/09/2023

in-fact for Yvonne Schlaeppi

** 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.