FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20349

	OMB APPROVAL	
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Check this box if no longer subject to Section 16. Form 4 or Form 5 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

1. Name and Address of Reporting Person* FLAUM SANDER A (Last) (First) (Middle) C/O EAGLE PHARMACEUTICALS, INC.						Issuer Name and Ticker or Trading Symbol EAGLE PHARMACEUTICALS, INC. [EGRX] Jate of Earliest Transaction (Month/Day/Year) 03/13/2015								neck all appli X Directo	cable) or (give title	ng Person(s) to Issuer 10% Owne Other (spec below)		ner
50 TICE BLVD., SUIT (Street) WOODCLIFF LAKE (City) (State		J (07677 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)								6. l	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				n
(City)	(3		le I - Non-I	Derivat	ive S	Secu	uritie	s Ac	quired, [Disp	osed o	of, or Be	neficia	lly Owned	t l			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,			Code (In 8)	str. V	Disposed 5) Amount	(A) or Ben	r Price	Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Dwnership Instr. 4)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		e.g., put	4. Transaction Code (Instr		5. Number of		6. Options, converti 6. Date Exercisable and Expiration Date (Month/Day/Year)			ble securities 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	/ OF D O (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Co	de V	,	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares					
Option (right to buy)	\$46.09	03/13/2015		A			5,000		(1)	03	3/12/2025	Common Stock	5,000	\$0.00	5,000		D	

Explanation of Responses:

1. The option fully vests on March 13, 2016, subject to the reporting person's continuous service with the issuer as of the vesting date.

Remarks:

/s/David E. Riggs

03/17/2015

** 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.