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## 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(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 OMB APPROVAL
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hours per response: 0.5

1. Name and Address of Reporting Person <sup>*</sup> $\underline{\text{Tarriff Scott}}$			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>EAGLE PHARMACEUTICALS, INC.</u> [ EGRX ]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			
(Last)(First)(Middle)C/O EAGLE PHARMACEUTICALS, INC.50 TICE BLVD., SUITE 315				X	Officer (give title below)	Other (specify below)		
			3. Date of Earliest Transaction (Month/Day/Year) 08/03/2015		President and CEO			
(Street) WOODCLIFF LAKE	NJ	07677	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indi Line) X	vidual or Joint/Group Fili Form filed by One Re Form filed by More th Person	porting Person		
(City)	(State)	(Zip)						

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Disposed Of			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock	08/03/2015		<b>S</b> <sup>(1)</sup>		10,658	D	<b>\$96.36</b> <sup>(2)</sup>	1,523,254	D	
Common Stock	08/03/2015		S <sup>(1)</sup>		2,342	D	<b>\$95.39</b> <sup>(3)</sup>	1,520,912	D	

# 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Ex		6. Date Exerc Expiration Da (Month/Day/Y	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)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. These shares were sold pursuant to a Rule 10b5-1 trading plan dated as of June 19, 2015.

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions ranging from \$95.79 to \$96.755, inclusive. The reporting person undertakes to provide to Eagle Pharmaceuticals, Inc., any security holder of Eagle Pharmaceuticals, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote (2) and in footnote (3).

3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions ranging from \$95.02 to \$95.70, inclusive.

#### **Remarks:**

<u>/s/ David E. Riggs, Attorney-</u> <u>in-Fact</u>

08/04/2015

\*\* 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.