FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL |
|--------------|
| |

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b) Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) 2. Issuer Name and Ticker or Trading Symbol 1. Name and Address of Reporting Person* EAGLE PHARMACEUTICALS, INC. **ProQuest Management LLC** Director X 10% Owner **EGRX** Officer (give title Other (specify below) below) (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 07/01/2015 2430 VANDERBILT BEACH ROAD, #108 - 190 6. Individual or Joint/Group Filing (Check Applicable Line) 4. If Amendment, Date of Original Filed (Month/Day/Year) (Street) **NAPLES** FL 34109 Form filed by One Reporting Person Form filed by More than One Reporting (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 5. Amount of 6. Ownership 7. Nature of Transaction **Execution Date** Securities Form: Direct Indirect (Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) Beneficially (D) or Indirect (I) (Instr. 4) Beneficial 5) Owned Following Ownership Reported (Instr. 4) (A) or (D) Transaction(s) Code Amount Price (Instr. 3 and 4) By ProQuest **\$0**⁽²⁾ 1(2) Common Stock, \$0.001 par value 07/01/2015 59,061 2,970 D Ι Management LLC Plans(1) Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 5. Number | 6. Date Exercisable and | 7. Title and 8. Price of 9. Number of 10. 1. Title of 2. 3. Transaction 3A. Deemed 11. Nature

| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | Date (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transa Code (8) | | of Deriv Secu Acqu (A) o Dispo of (D) (Instr and 5 | rities ired r osed) . 3, 4 | Expiration Day/\ (Month/Day/\ | | Amour Securi Under Deriva Securi and 4) | ties ying tive ty (Instr. 3 | Derivative Security (Instr. 5) | derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | of Indirect Beneficial Ownership (Instr. 4) | cial ship | |
|--------------------------------------|---|------------------------------|---|------------------------|---|--|--|-------------------------------|--------------------|--|--|--------------------------------------|--|---|--|--------------|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| l | | Reporting Person* ement LLC | | | | | | | | | | | | | | _ | |

| 1. Name and Address of Reporting Person* ProQuest Management LLC | | | | | | | |
|---|---------|----------|--|--|--|--|--|
| (Last) | (First) | (Middle) | | | | | |
| 2430 VANDERBILT BEACH ROAD, #108 - 190 | | | | | | | |
| (Street) | | | | | | | |
| NAPLES | FL | 34109 | | | | | |
| (City) | (State) | (Zip) | | | | | |
| 1. Name and Address of Reporting Person* ProQuest Investments IV, L.P. | | | | | | | |
| (Last) | (First) | (Middle) | | | | | |
| 2430 VANDERBILT BEACH ROAD, #108 - 190 | | | | | | | |
| (Street) | | | | | | | |
| NAPLES | FL | 34109 | | | | | |
| (City) | (State) | (Zip) | | | | | |
| Name and Address of Reporting Person* ProQuest Associates IV LLC | | | | | | | |
| (Last) | (First) | (Middle) | | | | | |
| 2430 VANDERBILT BEACH ROAD, #108 - 190 | | | | | | | |

| (Street) | | | | | | | |
|--|---------|----------|--|--|--|--|--|
| NAPLES | FL | 34109 | | | | | |
| (City) | (State) | (Zip) | | | | | |
| 1. Name and Address of Reporting Person* | | | | | | | |
| Moorin Jay | | | | | | | |
| (Last) | (First) | (Middle) | | | | | |
| C/O PROQUEST INVESTMENTS | | | | | | | |
| 2430 VANDERBILT BEACH ROAD, #108 - 190 | | | | | | | |
| (Street) | | | | | | | |
| NAPLES | FL | 34109 | | | | | |
| (City) | (State) | (Zip) | | | | | |
| 1. Name and Address of Reporting Person* | | | | | | | |
| SCHREIBER ALAIN | | | | | | | |
| (Last) | (First) | (Middle) | | | | | |
| C/O PROQUEST INVESTMENTS | | | | | | | |
| 2430 VANDERBILT BEACH ROAD, #108 - 190 | | | | | | | |
| (Street) | | | | | | | |
| NAPLES | FL | 34109 | | | | | |
| (City) | (State) | (Zip) | | | | | |

Explanation of Responses:

- 1. The shares are held in a ProQuest Management LLC Defined Benefit Pension Plan ("DBPP") FBO Jay Moorin and a ProQuest Management LLC Salary Savings Plan FBO Jay Moorin and for the benefit of certain other individuals. Jay Moorin and Alain Schreiber are trustees of ProQuest Management LLC DBPP FBO Jay Moorin and the ProQuest Management LLC Salary Savings Plan FBO Jay Moorin and for the benefit of certain other individuals. Each of the Reporting Persons disclaims beneficial ownership of such securities except to the extent of each Reporting Person's pecuniary interest in such securities.
- 2. The Reporting Persons transferred the shares from ProQuest Management LLC Salary Savings Plan FBO Jay Moorin and for the benefit of certain other individuals to an employee's separate IRA, with no additional consideration paid by the employee.

Remarks:

<u>/s/ Pasquale DeAngelis</u>

** 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.