FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								
Estimated average b	urdon								

0.5

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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					OI :	Secu	on 30(n	or the	mvest	uneni C	,011	ipany Act t	)i 19	140							
Name and Address of Reporting Person <sup>*</sup> Pernock David				<u>E</u> A	2. Issuer Name <b>and</b> Ticker or Trading Symbol  EAGLE PHARMACEUTICALS, INC. [ EGRX ]										Check	all app	licable)	g Perso	rson(s) to Issuer  10% Owner  Other (specify		
(Last)	(Ei	ret) (	Middle)													X	belov			below)	
(Last) (First) (Middle) EAGLE PHARMACEUTICALS, INC. 50 TICE BLVD., SUITE 315						3. Date of Earliest Transaction (Month/Day/Year) 05/16/2017										Pres. & Chief Comm. Officer					
Street)					4. If	f Ame	endmen	, Date	of Orig	ginal Fil	ed	(Month/Da	ıy/Ye	ear)		. Indiv ine)	idual o	r Joint/Group	Filing	(Check A	pplicable
WOODCLIFF NJ 07677																X Form filed by One Reporting Person					
LAKE	140				_											Form filed by More than One Reporting Person					
(City)	(St	ate) (	Zip)																		
		Tabl	e I - Noi	n-Deriv	/ative	Se	curiti	es Ac	quire	ed, D	isp	osed o	f, o	r Be	enefici	ally (	Owne	ed			
Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ar)   I	2A. Deemed Execution Date, f any Month/Day/Year)		Co	Transaction Disposed Code (Instr. 5)			ties Acquired (A) d Of (D) (Instr. 3, 4			4 and S		5. Amount of Securities Beneficially Owned Following		nership Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership	
										ode V		Amount		(A) o (D)	r Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 05/16/						/2017		I	P		200		A	A \$82		24 711			D		
		Та										sed of, o					vned				
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/Da	Date,	Code (Ins				Expir	ate Exer iration C nth/Day/	ate		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		of es ng re (Instr. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	nership rm: ect (D) Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	Code V			Date Exerc	e rcisable		Expiration Date	Title	, o	Number of Shares						

**Explanation of Responses:** 

Remarks:

/s/ Scott Tarriff, Attorney-in-

**Fact** 

\*\* Signature of Reporting Person

Date

05/16/2017

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.