FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

shington, D.C. 20549	ОМ

Check this box if no longer subject to	STATEMENT OF
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	Filed pursuant to

CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	nuc. See		File							ties Exchar mpany Act		1934			Tiours	perre	sponse.	0.5
1. Name and Address of Reporting Person* <u>Graves Michael</u>					<u>E</u> /	2. Issuer Name and Ticker or Trading Symbol EAGLE PHARMACEUTICALS, INC. [EGRX]									eck all appli Directo	cable) or	ng Per	son(s) to Iss	vner
(Last)) (First) (Middle) EAGLE PHARMACEUTICALS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 10/27/2023										Officer (give title below)		Other (s below)	specify
50 TICE BLVD., SUITE 315					4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	· ·				
(Street) WOODCLIFF LAKE NJ 07677					X Form filed by One Reporting Person Form filed by More than One Reportin Person										I				
(City)	(S	tate)	(Zip)		Rı	Che	ck this b	oox to ind	licate that	a trans	tion Inc	made purs	uant to	o a contr nstructio	ract, instructi n 10.	on or writter	ı plan t	hat is intende	d to
		Tab	le I - Nor	า-Deriv	ative	e Se	curit	ies Ac	quired	, Dis	sposed o	of, or B	enef	ficiall	y Owned	t			
Da Da			Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Yea		r, Transaction Code (Instr. 5		n Dispose	4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										· v	Amount	(A) (D)	or F	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common	Common Stock 10/2			10/27	7/2023						9,36	0 A	A \$4.9		10,360			D	
		Т	able II -								osed of converti				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	Code (Inst				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)		Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nu of	nount imber ares					
Stock Option (right to buy)	\$4.94	10/27/2023			М			9,360	(1)		11/21/2023	Commor Stock	9,	,360	\$0.00	0		D	

Explanation of Responses:

1. Fully vested and exercisable.

Remarks:

/s/ Scott Tarriff, Attorney-in-

** Signature of Reporting Person

Fact

10/31/2023

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.