Meyers Pete A. Form 4 January 25, 2019

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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Check this box

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1(b).

(Last)

(City)

1. Name and Address of Reporting Person * Meyers Pete A.

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

EAGLE PHARMACEUTICALS,

(Check all applicable)

Chief Financial Officer

INC. [EGRX]

01/07/2019

(Middle)

(Zip)

3. Date of Earliest Transaction (Month/Day/Year)

X_ Officer (give title below)

Director

10% Owner Other (specify

C/O EAGLE PHARMACEUTICALS, INC., 50

(First)

TICE BLVD., SUITE 315

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

(Street)

(State)

Filed(Month/Day/Year) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

WOODCLIFF LAKE, NJ 07677

(City)	(State)	(Zip) Tabl	e I - Non-D	Derivative	Securi	ities Acqu	iired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) Execution Date any (Month/Day/Y		3. Transactio Code (Instr. 8)	4. Securities Acquired n(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	01/07/2019		Code V $F_{\underline{(1)}}$	Amount 600	(D)	Price \$ 41.33	7,100	D	
Common Stock	01/23/2019		A	19,300 (2)	A	(3)	26,400	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 42.4	01/23/2019		A	43,200	<u>(4)</u>	01/23/2029	Common Stock	43,200

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Meyers Pete A. C/O EAGLE PHARMACEUTICALS, INC. 50 TICE BLVD., SUITE 315 WOODCLIFF LAKE, NJ 07677

Chief Financial Officer

Signatures

/s/ Scott Tarriff,
Attorney-in-Fact
01/25/2019

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) Represents shares withheld to satisfy withholding tax obligations.
- Represents restricted stock units ("RSUs"). The RSUs vest over a period of four years, with 25% of the RSUs vesting on each of the one,
- (2) two, three and four-year anniversaries of January 23, 2019, subject to the Reporting Person's continuous service with the Issuer as of the applicable vesting date.
- (3) Each RSU represents a contingent right to receive one share of the Issuer's common stock.
 - The option vests over a period of four years, with 25% of the shares underlying the option vesting on January 23, 2020, the first
- (4) anniversary of the date of grant, and the remainder vesting in 36 equal monthly installments thereafter, subject to the Reporting Person's continuous service with the Issuer as of the applicable vesting date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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