FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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STATEMENT	OF CHAN	GES IN BEN	EFICIAL O	WNERSHIP

OMB APPRO	DVAL								
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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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Mayer Eldon C. III						2. Issuer Name and Ticker or Trading Symbol <u>Eiger BioPharmaceuticals, Inc.</u> [EIGR]								all app Direc	olicable) ctor	g Person(s) to I	Owner	
(Last) (First) (Middle) C/O EIGER BIOPHARMACEUTICALS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 11/26/2018								belov	er (give title w)	below	(specify)	
2155 PARK BOULEVARD (Street) PALO ALTO CA 94306					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(St		Zip)															
		Tabl	e I - 1	Non-Deriv	ative	Secu	uritie	s Ac	quire	ed, D	isposed o	f, or E	Benefic	ially	Owne	ed		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y				Execution Date,		·			Acquired (A) or (D) (Instr. 3, 4 and 5)			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)			(11150.4)
Common Stock 11/26/201)18	8			P		7,500	A	\$9.75	524 ⁽¹⁾	7,500		D		
Common Stock 11/27/201					018	8			P		7,500	A	\$9.9	\$9.921 ⁽²⁾		15,000	D	
Common Stock 11/28/200					001	01			P		6,000	A	\$10.0	745 ⁽³⁾	21,000		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)	erivative Conversion Date Execution Date, Tra ecurity or Exercise (Month/Day/Year) if any Co				Transa Code (ansaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		rative rities nired r osed)	Expiration Date (Month/Day/Year)		Date	Amount of		8. Price of Derivative Security (Instr. 5)		e derivative	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were acquired in multiple transactions at prices ranging from \$9.57 to \$9.99 inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, 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 footnotes 1, 2 and 3 to this Form 4.
- 2. The price reported in Column 4 is a weighted average price. These shares were acquired in multiple transactions at prices ranging from \$9.77 to \$10.09 inclusive.
- 3. The price reported in Column 4 is a weighted average price. These shares were acquired in multiple transactions at prices ranging from \$9.7495 to \$10.26 inclusive.

Remarks:

/s/ James H. Welch, Attorneyin-Fact

11/28/2018

** 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.