FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours ner resnonse:								

Instruc	tion 1(b).		Filed	pursua or Se	ant to S ection 3	ection 30(h) o	16(a) f the Ir	of the S vestme	Securit ent Co	ies Excl mpany A	nange . Act of 1	Act of L940	1934		<u>  L</u>				0.0
1. Name and Address of Reporting Person*  Glenn Jeffrey S				2. Issuer Name <b>and</b> Ticker or Trading Symbol Eiger BioPharmaceuticals, Inc. [ EIGR ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last)	(Fi	rst) (N AVE, SUITE 350	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/16/2020							$\dashv$		er (give	e title Ot		er (sp ow)			
(Street) PALO ALTO CA 94306				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City)	(St	rate) (Z	Zip)																
		Table	I - Non-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed	of,	or B	enefici	ally Own	ed				
Date			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year		ate,	Code		4. Securities Acqu Disposed Of (D) (III e (Instr.					5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amo	unt	(A) or (D)	Pric	e	Reported Transaction(s) (Instr. 3 and 4)					
Common	Stock		03/16/2020 Р 30,000 A \$5.0271 <sup>(1)</sup> 66,355		D														
Common	Stock													460		I	I	By son	
Common	nmon Stock													151,064		I		By Eiger Group International, Inc. <sup>(2)</sup>	
		Tal	ole II - Derivati (e.g., pu												d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	if any	4. Transaction Code (Instr. 8)		5. Number of Derivative 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 Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)	deriva Secur Benet Owne Follow Repor	ities icially d ving rted action(s)	10. Owners Form: Direct ( or India (I) (Inst	hip D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	Date (D) Exerci		sable	Expiration Date Titl			Amount or Number of Shares						

## **Explanation of Responses:**

1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$4.89 to \$5.14, 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 purchased at each separate price within the range.

(D)

2. Shares are held by Eiger Group International, Inc. ("EGI"). The Reporting Person is the Chief Executive Officer of EGI and has sole power to vote and sole power to dispose of shares directly owned by EGI. The Reporting Person disclaims beneficial ownership of such shares except to the extent of any pecuniary interest therein.

## Remarks:

/s/ Sriram Ryali, Attorney-in-

03/17/2020

Fact

\*\* 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.