SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

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* KINDLER JEFFREY B			2. Date of Event Requiring Staten (Month/Day/Year 03/21/2013		3. Issuer Name and Ticker or Trading Symbol SIGA TECHNOLOGIES INC [SIGA]							
(Last) C/O SIGA TE	.ast) (First) (Middle) C/O SIGA TECHNOLOGIES, INC.					Relationship of Reporting Person(s) to Issuer heck all applicable) X Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)			
35 EAST 62ND STREET					Officer (give title below)		Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line)			
(Street) NEW YORK	NY	10065									y One Reporting Person y More than One erson	
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)				4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable ar Expiration Date (Month/Day/Year)		d 3. Title and Amount of Secur Underlying Derivative Secur		ty (Instr. 4) Con or E		version xercise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
Explanation of Re	ashonsas.		Date Exercisable	Expiration Date	n Title	9	Amount or Number of Shares	Secur	tive	Direct (D) or Indirect (I) (Instr. 5)		

Remarks:

No securities are beneficially owned.

/s/ Jeffrey B. Kindler

** Signature of Reporting Person

03/25/2013

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 5 (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.