FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPRO	JVAL
	OMB Number:	3235-0287
l	Estimated average burd	en
l	hours per response:	0.5

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* <u>Luckshire Daniel J</u>					2. Issuer Name and Ticker or Trading Symbol SIGA TECHNOLOGIES INC [SIGAQ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle) C/O SIGA TECHNOLOGIES, INC. 660 MADISON AVENUE, SUITE 1700					3. Date of Earliest Transaction (Month/Day/Year) 06/04/2015 X Officer (give title below) below) Executive VP & CFO														
(Street)					4. If	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												.	
NEW YORK NY 10065				-	Form filed by More than One Reporting Person														
(City)	(S		(Zip)	. D i	4:									<i>6</i> ; . ; . 1					
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Transplate (Month)			saction	action 2A. Do Execu Day/Year) if any			3. 4. Secu Transaction Code (Instr. 5)		4. Secur Dispose	rities Acquired (A) o ed Of (D) (Instr. 3, 4		(A) or	5. Amou Securiti Benefici Owned I	int of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount (A) or (D)		() or ()	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock, par value \$.0001 per share 06/04					4/201	/2015			М		2,91	.7 A \$		\$0	36,436			D	
Common Stock, par value \$.0001 per share 06/04/					4/201	/2015		M		8,33	3	A	\$0	44	1,769		D		
Common Stock, par value \$.0001 per share 06/04/						/2015		M		8,333 A		A	\$0	53,102			D		
		T							uired, Di s, option						Owned				
1. Title of Derivative Security (Instr. 3)	e Conversion Date Executi or Exercise (Month/Day/Year) if any		3A. Deeme Execution if any (Month/Day	Date, Transaction			n of		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)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	or Nu of	ımber					
Restricted Stock Units	(1)	06/04/2015			M			2,917	(1)		(1)	Comm Stock par val \$.000 per sha	, ue 2	,917	\$0	8,751		D	
Restricted Stock Units	(2)	06/04/2015			М			8,333	(2)		(2)	Comm Stock par val \$.000 per sha	, ie 8	,333	\$0	58,334	1	D	
Restricted Stock Units	(3)	06/04/2015			М			8,333	(3)		(3)	Comm Stock par val \$.000 per sha	, ie 8	,333	\$0	91,667	7	D	

Explanation of Responses:

- 1. Represents vesting and conversion of certain RSUs granted on February 28, 2012. Each RSU converts into one share of Common Stock of the Issuer on a one for one basis.
- 2. Represents vesting and conversion of certain RSUs granted on January 3, 2013. Each RSU converts into one share of Common Stock of the Issuer on a one for one basis.
- 3. Represents vesting and conversion of certain RSUs granted on January 3, 2014. Each RSU converts into one share of Common Stock of the Issuer on a one for one basis.

Remarks:

/s/ Daniel J. Luckshire 06/08/2015

** Signature of Reporting Person

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.