FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washing

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

on, D.C. 20549	OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden 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>Hruby Dennis E</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol SIGA TECHNOLOGIES INC [ SIGAQ ]									5. Relationship of Reporti (Check all applicable) Director			10% Owner	
(Last) (First) (Middle) C/O SIGA TECHNOLOGIES, INC., 660 MADISON AVENUE, SUITE 1700					3. Date of Earliest Transaction (Month/Day/Year) 06/05/2015										helow)	) "	cienti	below) ientific Officer	
(Street)	DISON AV	ENOE, SUITE			4. I	4. If Amendment, Date of Original Filed (						ay/Year		Lin	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person				
NEW YO	ORK N	Y	10065		-											filed by Mor	y More than One Rep		
(City)	(S	itate)	(Zip)																
			le I - Nor							Disp					ly Owner				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.						Securiti Benefici Owned	5. Amount of Securities Beneficially Owned Following Reported		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount (		) or )	Price	Transaction(s) (Instr. 3 and 4)				(11311.4)
Common Stock, par value \$.0001 per share					06/05/2015						6,25	50	A	\$0	53	53,374		D	
				5/201	-			M		6,25	50	A	\$0	59	59,624		D		
Common Stock, par value \$.0001 per share 06/0				5/2015				M		6,25	0	A	\$0	65	65,874		D		
		T							quired, D s, option						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	ed Date,	4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercisa Expiration Date (Month/Day/Yea		ble and	7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indirec (I) (Instr.	Ownership	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	O N O	umber					
Restricted Stock Units	(1)	06/05/2015			М			6,250	(1)		(1)	Commo Stock par val \$.000 per sha	ie (	5,250	\$0	18,750	)	D	
Restricted Stock Units	(2)	06/05/2015			М			6,250	(2)		(2)	Commo Stock par val \$.000 per sha	ie (	5,250	\$0	43,750	)	D	
Restricted Stock Units	(3)	06/05/2015			M			6,250	(3)		(3)	Commo Stock par vali	ie (	5,250	\$0	68,750		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/ Dennis E. Hruby

06/09/2015

\*\* Signature of Reporting Person

per share

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.