OMB APPROVAL	
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UNITED STAES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549	
SCHEDULE 13D	
Under the Securities Exchange Act of 1934 (Amendment No)*	
SIGA PHARMACEUTICALS, INC.	
(Name of Issuer)	
Common Stock	
(Title of Class of Securities)	
826 917 10 6	
(CUSIP Number)	
Sheryl Albanese, Esq. Ehrenreich Eilenberg Krause & Zivian LLP 11 East 44th Street, 17th Floor New York, New York 10017 (212) 986-9700	
(Name, Address and Telephone Number of Person Authorized to Receive Notices and Communications)	
September 9, 1997	
(Date of Event which Requires Filing of this Statement)	
f the filing person has previously filed a statement of Schedule 13G to repo he acquisition which is the subject of the Schedule 13D, and is filing th	

schedule because of Rule 13d-1(b)(3) or (4), check the following box [].

Check the following box if a fee is being paid with this statement [X]. (A fee is not required only if the reporting person: (1) has a previous statement on file reporting beneficial ownership of more than five percent of the class of securities described in Item 1; and (2) has filed no amendment subsequent thereto reporting beneficial ownership of five percent or less of such class.) (See Rule 13d-7.)

Note: Six copies of this statement, including all exhibits, should be filed with the Commission. See Rule 13d-1(a) for other parties to whom copies are to be sent.

*The remainder of this cover page shall be filed out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required on the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

(Continued on following page(s))

1 NAME OF REPORTING PERSON S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON					
Richard Stone					
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*		[] [x]		
3	SEC USE ONLY				
4	SOURCE OF FUNDS*				
	PF				
5	CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIITEMS 2(d) OR 2(e)	RED P	URSUANT TO		
6 CITIZENSHIP OR PLACE OF ORGANIZATION					
	USA				
BENI	MBER OF 7 SOLE VOTING POWER SHARES 470,665 EFICIALLY				
	PORTINGPERSON 9 SOLE DISPOSITIVE POWER WITH 470,665				
	10 SHARED DISPOSITIVE POWER 0				
11	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING	PERS	ON		
	470,665				
12	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDE	S CER	TAIN SHARES*		
13	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)				
	7.2%				
14	TYPE OF REPORTING PERSON*				
	IN				

*SEE INSTRUCTIONS BEFORE FILLING OUT!

Signature

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: as of 9/9/97 /s/Richard Stone

Richard Stone

Executed 6/3/98

(120496DTI)