SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burde	en							
hours per response:	0.5							

1. Name and Address of Reporting Person <sup>*</sup> Edick Paul R		Person*	2. Issuer Name and Ticker or Trading Symbol XERIS PHARMACEUTICALS INC [ XERS	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			1	X	Director	10% Owner		
(Last)	(First)	(Middle)		x	Officer (give title below)	Other (specify below)		
C/O XERIS PHARMACEUTICALS, INC.			3. Date of Earliest Transaction (Month/Day/Year) 01/31/2020		See Remarks			
180 N. LASA	LLE STREET,	SUITE 1600						
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	vidual or Joint/Group Fil	ing (Check Applicable		
CHICAGO	IL	60601		X	Form filed by One Re	eporting Person		
					Form filed by More the Person	nan One Reporting		
(City)	(State)	(Zip)						

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)						5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock	01/31/2020		F		9,801 <sup>(1)</sup>	D	\$6.37	163,134	D		
Common Stock								13,430 <sup>(2)</sup>	I	By: Paul R. Edick 2008 Revocable Trust u/d/t dated 6/25/2018	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Nur of Deriv Secur Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed	6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. These shares were withheld by the issuer to satisfy statutory tax withholding requirements on vesting of restricted stock units. The number of shares to be withheld was determinable on January 31, 2020. No shares were sold in connection with this transaction.

2. The reporting person disclaims beneficial ownership of these securities except to the extent of his pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of all of the reported shares for purposes of Section 16 or for any other purpose.

#### Remarks:

Chairman, President & Chief Executive Officer

<u>/s/ Beth Hecht, as Attorney-in-</u> <u>Fact</u>

02/04/2020

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  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.