FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0		

287 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*  Arnold Charlotte C.						2. Issuer Name <b>and</b> Ticker or Trading Symbol ANI PHARMACEUTICALS INC [ ANIP ]								Check a	onship of Reporting all applicable) Director Officer (give title below) Chief Finance		10% (	Owner
(Last) (First) (Middle) C/O ANI PHARMACEUTICALS, INC. 210 MAIN STREET WEST					3. Date of Earliest Transaction (Month/Day/Year) 11/27/2013								X	Other (specify below)				
(Street) BAUDETTE MN 56623  (City) (State) (Zip)				4. 11	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     Form filed by More than One Reporting Person					
		Tab	le I - 1	Non-Deriv	/ative	Sec	uritie	s Ac	cquire	ed, D	isposed o	f, or E	Benefici	ally C	wne	ed		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yet				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities A Disposed Of (I					d 5) Secui Bene Owne		ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
							Î	Code	v	Amount	(A) or (D)	Price	- 1	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock, par value \$0.0001 11/27/201				013	3			A <sup>(1)</sup>		3,675	Α	(1)	(1)		33,718	D		
Common Stock, par value \$0.0001 11/27/201				013	.3		F <sup>(2)</sup>		1,364	D	\$14.60	L4.6044 <sup>(2)</sup>		32,354	D			
		Ta	able II								oosed of, convertib				ned			
1. Title of Derivative Security (Instr. 3)	ivative or Exercise Price of Derivative Security  Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)	(Instr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Number of Title Shares		t		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

## **Explanation of Responses:**

- 1. Represents a portion of the shares to be received by the Reporting Person under a Transaction Bonus Agreement with ANIP Acquisition Company, which portion was released to the Reporting Person from a rabbi trust on the date indicated.
- 2. Represents sales effected pursuant to a 10b5-1 trading plan adopted by the Reporting Person on August 12, 2013, the proceeds of which are used to pay the required tax withholding amount on the shares released from the rabbi trust. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$14.27 to \$14.98 per share. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold by her at each separate price on each date of sale.

/s/ Jane A. Meyer, as attorney 11/27/2013

in fact

\*\* Signature of Reporting Person

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 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.