FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response:	0.5							

Instruction 1(b).			Filea		nt to Section 16(a) c ction 30(h) of the Inv					34			
1. Name and Address of Reporting Person* Schrepfer Robert W (Last) (First) (Middle) C/O ANI PHARMACEUTICALS, INC. 210 MAIN STREET WEST			or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol ANI PHARMACEUTICALS INC [ANIP] 3. Date of Earliest Transaction (Month/Day/Year) 05/22/2018							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) SVP - New Bus Dev & Spec Sales			
(Street) BAUDETTE MN 56623 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Indir Line) X	l '			
	Т	able I - No	n-Deriva	tive S	ecurities Acqu	uired,	Dis	posed of,	or Ben	eficially	Owned		
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(111311. 4)
Common Stock 05/22/			2018		F ⁽¹⁾		600	D	\$61.88	19,154	D		
					urities Acquir ls, warrants, o	•		•		•	wned		

6. Date Exercisable and

Expiration Date (Month/Day/Year)

Date Exercisable

Expiration

Explanation of Responses:

Conversion

or Exercise

Price of Derivative

Security

1. Title of

Derivative Security (Instr. 3)

1. Shares withheld for tax purposes exempt under Rule 16(b)-3 in connection with the vesting of restricted stock, which was previously reported.

Code

Transaction

Code (Instr.

8)

/s/ Robert Schrepfer

7. Title and

Amount of Securities

Underlying Derivative

and 4)

Title

Security (Instr. 3

05/24/2018

** Signature of Reporting Person

Amount Number

of Shares

Date

9. Number of

derivative Securities

Beneficially

Owned

Following

Reported Transaction(s) (Instr. 4)

10.

Form:

Ownership

Direct (D)

or Indirect (I) (Instr. 4)

11. Nature

of Indirect

Beneficial

(Instr. 4)

Ownership

8. Price of

Security (Instr. 5)

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

3A. Deemed

if anv (Month/Day/Year)

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

3. Transaction

Date (Month/Day/Year)

** 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.

5. Number

of Derivative

Securities

Acquired
(A) or
Disposed
of (D)
(Instr. 3, 4
and 5)

(D)

(A)