FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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>Arnold Charlotte C.</u>						2. Issuer Name and Ticker or Trading Symbol ANI PHARMACEUTICALS INC [ANIP]									eck all appli Directo	ionship of Reportin all applicable) Director Officer (give title		10% O	vner
	I PHARMA	CEUTICALS, I	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/06/2015										-	nd CF	Other (specify below)	
210 MAIN STREET WEST (Street) BAUDETTE MN 56623					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person				
(City)			(Zip)												Form f Persor	orm filed by More than One Reporting erson			
		Tab	le I - Non	-Deriva	ative	Sec	uriti	es Ac	quired,	Dis	posed o	of, or B	enet	ficiall	y Owned	ł			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)		ities Acqu d Of (D) (Ir	ired (/ nstr. 3	A) or , 4 and	5. Amou Securitie Benefici Owned F Reporte	ies Fi ially (E Following (I)		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D) Pr		Price	Transaci (Instr. 3	tion(s)			(111501.4)
Common Stock 05/06/					/2015			М		4,000	4,000 A		\$6.36	29	29,585		D		
		Т	able II - D								osed of onverti				Owned				
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/Yea	Date, T	4. Transactic Code (Inst) 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				C	Code	v	(A)		Date Exercisab		expiration pate	Title	or Nu of	nount mber ares					
Option to Purchase	\$6.36	05/06/2015			M			4,000	07/12/201	4 0	7/11/2023	Common	4,	000	\$0.00	40,333	3	D	

Explanation of Responses:

/s/ Charlotte C. Arnold

05/07/2015

** 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.