FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

3235-0287 OMB Number: 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*  MARSHBANKS TRACY						2. Issuer Name <b>and</b> Ticker or Trading Symbol ANI PHARMACEUTICALS INC [ ANIP ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				
(Last) (First) (Middle)  1 SOUTH WACKER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 03/18/2014									Offic below	er (give title w)	Other below	(specify
SUITE 3900					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) CHICAGO IL 60606													X		n filed by Mor	e Reporting Pers		
(City)	(St	ate) (	(Zip)															
		Tab	le I - No	on-Deriv	ative	Secu	ıritie	s Ac	quirec	d, Di	sposed o	f, or E	enef	icially	Own	ed		
1. Title of Security (Instr. 3)			2. Transac Date (Month/Da		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		and 5) Securities Beneficially		ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A) oi (D)	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)			(111501.4)		
Common	Stock			03/18/2	2014				S		14,851	D	\$3	3.8264	5	37,643	I	See Footnote 1 <sup>(1)</sup>
Common Stock			03/18/2014				S		6,029	D	\$3	\$33.8264		18,273	I	See Footnote 2 <sup>(2)</sup>		
Common Stock			03/18/2014				S		232	D	\$3	\$33.8264		8,397	I	See Footnote 3 <sup>(3)</sup>		
Common Stock				03/19/2014				S		2,986	D	\$3	\$32.9781		34,657	I	See Footnote 1 <sup>(1)</sup>	
Common Stock 0				03/19/2	03/19/2014				S		1,213	D	\$3	\$32.9781		17,060	I	See Footnote 2 <sup>(2)</sup>
Common Stock				03/19/2014				S		47	D	\$3	\$32.9781		8,350	I	See Footnote 3 <sup>(3)</sup>	
		Та	able II -								osed of, convertib				wned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	1	4. Transa Code (I 8)	ction	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Day/N		isable and	7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		8. P Deri Sec (Ins	rice of ivative urity tr. 5)	ive derivative y Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
-xnlanation	of Respons	Ac.			Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	er				

- 1. Held by: FA Private Equity Fund IV, L.P., of which the Reporting Person may be deemed to be a beneficial owner pursuant to rule 16a-1(a)(1).
- 2. Held by: The Productivity Fund IV Liquidating Trust, of which the Reporting Person may be deemed to be a beneficial owner pursuant to rule 16a-1(a)(1).
- 3. Held by: The Productivity Fund IV Advisors Fund Liquidating Trust, of which the Reporting Person may be deemed to be a beneficial owner pursuant to rule 16a-1(a)(1).

## Remarks:

Reporting person disclaims the existence of a "group" and disclaims beneficial ownership of any securities (except to the extent of such Reporting Person's pecuniary interest in such securities) other than any securities reported herein as being directly

Tracy L. Marshbanks

03/19/2014

\*\* 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.	