FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL							
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* Schrepfer Robert W						2. Issuer Name and Ticker or Trading Symbol ANI PHARMACEUTICALS INC [ANIP]										of Reportin cable) or (give title	ig Per	son(s) to Iss 10% O Other (s	vner
	`	CEUTICALS, I	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/06/2015										helow)	below) VP Bus Dev		below)		
(Street) BAUDETTE MN 56623 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - Non	-Deriva	tive	Secu	rities <i>i</i>	Acq	uired,	Dis	osed c	of, or	Bene	eficial	ly Owned	ł			
Date				Date	ate lonth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.					Securition Benefici Owned I	5. Amount of Securities Beneficially Owned Following Reported		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(,	A) or D)	Price	Transac (Instr. 3	tion(s)	on(s)		(Instr. 4)
Common Stock 05/0					6/2015				M		2,50	0	A	\$6.6	5 10	,500		D	
		7	able II - I (sed of				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date, T	Code (In				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)	s lly	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)
				c	ode \	v .	(A) (D)		ate xercisabl		xpiration ate	Title	0 N 0	lumber	nber				
Option to Purchase	\$6.6	05/06/2015			М		2,50	00 0	08/01/2014	4 0	7/31/2023	Comm		2,500	\$0.00	43,750)	D	

Explanation of Responses:

/s/ Robert W. Schrepfer

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.