SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

)	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person* <u>Arnold Charlotte C.</u> (Last) (First) (Middle) C/O ANI PHARMACEUTICALS, INC. 210 MAIN STREET WEST		on*	2. Issuer Name and Ticker or Trading Symbol <u>ANI PHARMACEUTICALS INC</u> [ ANIP ]		tionship of Reporting Pe all applicable) Director Officer (give title	rson(s) to Issuer 10% Owner Other (specify
		( )	3. Date of Earliest Transaction (Month/Day/Year) 10/02/2013		below) Chief Financia	below) l Officer
(Street) BAUDETTE (City)	MN (State)	56623 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	vidual or Joint/Group Filir Form filed by One Rep Form filed by More the Person	porting Person

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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)		(1150.4)
Common Stock, par value \$0.0001	10/02/2013		A <sup>(1)</sup>		3,675	A	(1)	15,230	D	
Common Stock, par value \$0.0001	10/02/2013		F <sup>(2)</sup>		1,364	D	<b>\$10.0938</b> <sup>(2)</sup>	13,866	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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/Year)	4. Transa Code ( 8)		of Ex		6. Date Exerc Expiration Da (Month/Day/Y	7. Title Amour Securi Underl Deriva Securi and 4)	nt of ties ying tive ty (Instr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

## 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 \$9.94 to \$10.21 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 in fact

10/04/2013

\*\* 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.