FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Arnold Charlotte C.						2. Issuer Name and Ticker or Trading Symbol ANI PHARMACEUTICALS INC [ANIP]									k all app Dired	olicable)	10%	Person(s) to Issuer 10% Owner Other (specify	
(Last) (First) (Middle) C/O ANI PHARMACEUTICALS, INC. 210 MAIN STREET WEST						3. Date of Earliest Transaction (Month/Day/Year) 03/05/2014									below) Chief Financial Officer				
(Street) BAUDET			56623 (Zip)		_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indir Line) X	Forn	or Joint/Group Filing (Check Applicable rm filed by One Reporting Person rm filed by More than One Reporting rson			
		Tab	le I - N	on-Deriv	vative	Sec	uritie	s Ac	quired	d, Di	sposed o	of, or E	3enefi	cially	Owne	ed			
Date			2. Transa Date (Month/D		Exe if ar	2A. Deemed Execution Date, if any (Month/Day/Year)				4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Secu Bene Own		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
										v	Amount	(A) o	r Price	•		action(s) 3 and 4)		(Instr. 4)	
Common Stock, par value \$0.0001 03/				03/05/	2014	014		A ⁽¹⁾		3,675	A		(1)	6	63,761	D			
Common Stock, par value \$0.0001 03/05					2014)14		F ⁽²⁾		1,357	D	\$36	\$36.43(2)		52,404	D			
Common Stock, par value \$0.0001 03/06/2				2014	014		F		2,000	D	\$36	\$36.6437		50,404	D				
		Т	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)	3A. Deemed Execution Date, if any (Month/Day/Year)			Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exerction Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Sec (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amour or Numbe of Shares	r					

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 \$33.33 to \$37.18 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 03/07/2014 in fact

** 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.