## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, I | D.C. | 20549 |
|---------------|------|-------|
|---------------|------|-------|

| STATEMENT | <b>OF CHANGES</b> | IN BENEFICIAL | OWNERSHIP |
|-----------|-------------------|---------------|-----------|
|           |                   |               |           |

| l | OMB APPF             | ROVAL     |
|---|----------------------|-----------|
|   | OMB Number:          | 3235-0287 |
| l | Estimated average bu | ırden     |

0.5

hours per response:

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>Brown Robert E. JR</u> |                                                                                                                                                                                                                                                                            |            |             | 2. Issuer Name <b>and</b> Ticker or Trading Symbol ANI PHARMACEUTICALS INC [ ANIP ] |                                                                                                                         |                                                          |                                                                                                   |     |                       |                                         | (Che             | eck all appli<br>Directo                                      | tionship of Reportir<br>all applicable)<br>Director                                                                       |                                                                                    | 10% Ov                                                                   | vner                                                               |  |   |             |
|--------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------------------------------------------------------------------------------|-----|-----------------------|-----------------------------------------|------------------|---------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|--|---|-------------|
| (Last)                                                             | •                                                                                                                                                                                                                                                                          | irst)      | (Middle)    |                                                                                     | 3. Date of Earliest Transaction (Month/Day/Year)  04/16/2015  Officer (give title below)  below)  Other (specify below) |                                                          |                                                                                                   |     |                       |                                         |                  |                                                               |                                                                                                                           |                                                                                    |                                                                          |                                                                    |  |   |             |
| 210 MAIN STREET WEST                                               |                                                                                                                                                                                                                                                                            |            |             |                                                                                     | 4. It                                                                                                                   | 4. If Amendment, Date of Original Filed (Month/Day/Year) |                                                                                                   |     |                       |                                         |                  |                                                               |                                                                                                                           | 6. Individual or Joint/Group Filing (Check Applicable Line)                        |                                                                          |                                                                    |  |   |             |
| (Street)                                                           | TTE M                                                                                                                                                                                                                                                                      | IN .       | 56623       |                                                                                     |                                                                                                                         |                                                          |                                                                                                   |     |                       |                                         |                  | 1                                                             | X Form                                                                                                                    | orm filed by One Reporting Person<br>orm filed by More than One Reporting<br>erson |                                                                          |                                                                    |  |   |             |
| (City)                                                             | (S                                                                                                                                                                                                                                                                         | tate)      | (Zip)       |                                                                                     |                                                                                                                         |                                                          |                                                                                                   |     |                       |                                         |                  |                                                               |                                                                                                                           |                                                                                    |                                                                          |                                                                    |  |   |             |
|                                                                    | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned                                                                                                                                                                                           |            |             |                                                                                     |                                                                                                                         |                                                          |                                                                                                   |     |                       |                                         |                  |                                                               |                                                                                                                           |                                                                                    |                                                                          |                                                                    |  |   |             |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D            |                                                                                                                                                                                                                                                                            |            |             |                                                                                     | Execution Date,                                                                                                         |                                                          | Transaction Disposed Of (D) Code (Instr. 5)                                                       |     |                       | Acquired (A) or<br>(D) (Instr. 3, 4 and |                  | 5. Amount of Securities Beneficially Owned Following Reported |                                                                                                                           | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)                  |                                                                          | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |  |   |             |
|                                                                    |                                                                                                                                                                                                                                                                            |            |             |                                                                                     |                                                                                                                         |                                                          |                                                                                                   |     | Code                  | v                                       | Amount           | (A)<br>(D)                                                    | (A) or<br>(D) Price                                                                                                       |                                                                                    | Transac<br>(Instr. 3                                                     | ction(s)                                                           |  |   | ,iiisti. 4) |
| Common Stock <sup>(1)</sup> 04/16/                                 |                                                                                                                                                                                                                                                                            |            | /201        | 5                                                                                   |                                                                                                                         |                                                          | A                                                                                                 |     | 800                   | A                                       | \                | \$0.00                                                        | 9,110                                                                                                                     |                                                                                    |                                                                          | D                                                                  |  |   |             |
|                                                                    |                                                                                                                                                                                                                                                                            | Т          | able II - [ |                                                                                     |                                                                                                                         |                                                          |                                                                                                   |     | uired, D<br>s, option |                                         |                  |                                                               |                                                                                                                           |                                                                                    | Owned                                                                    |                                                                    |  |   |             |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                | vative rity (.3) Conversion or Exercise Price of Derivative Security  Date (Month/Day/Year)  Date (Month/Day/Year)  If any (Month/Day/Year)  If any (Month/Day/Year)  If any (Month/Day/Year)  Security  Transaction Code (Instr. 8)  Acquire (A) or Disp of (D (Instr. 8) |            |             |                                                                                     | 5. Num<br>of<br>Deriva<br>Securi<br>Acquir<br>(A) or<br>Dispos<br>of (D)<br>(Instr.<br>and 5)                           | ative<br>ities<br>red<br>sed                             | Expiration Date (Month/Day/Year) Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) |     |                       |                                         |                  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)           | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s<br>(Instr. 4) | ly                                                                                 | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |   |             |
|                                                                    |                                                                                                                                                                                                                                                                            |            |             |                                                                                     | Code                                                                                                                    | v                                                        | (A)                                                                                               | (D) | Date<br>Exercisab     |                                         | xpiration<br>ate | Title                                                         | or<br>Nu<br>of                                                                                                            | nount<br>mber<br>ares                                                              |                                                                          |                                                                    |  |   |             |
| Option to                                                          | \$68.71 <sup>(2)</sup>                                                                                                                                                                                                                                                     | 04/16/2015 |             |                                                                                     | A                                                                                                                       |                                                          | 2,600                                                                                             |     | 04/16/201             | 6 0                                     | 4/15/2025        | Common                                                        | 2,                                                                                                                        | 600                                                                                | \$0.00                                                                   | 2,600                                                              |  | D |             |

## **Explanation of Responses:**

- 1. On April 16, 2015, the Board of Directors of the Issuer approved the grant of restricted stock, which vest on the first anniversary of the grant date.
- 2. The closing price of the Issuer's common stock on The NASDAQ Global Market on the grant date.

/s/ Robert E. Brown, Jr. 04/20/2015

\*\* Signature of Reporting Person

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.