FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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*  TANNENBAUM RENEE P	2. Date of E Requiring S (Month/Day 03/19/202	statement /Year)	3. Issuer Name and Ticker or Trading Symbol ANI PHARMACEUTICALS INC [ ANIP ]						
(Last) (First) (Middle) C/O ANI PHARMACEUTICALS, INC. 210 MAIN STREET WEST  (Street) BAUDETTE MN 56623	STREET WEST		4. Relationship of Reporting Issuer (Check all applicable)  X Director  Officer (give title below)	10% C	Person(s) to  10% Owner  Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State) (Zip)	able I - Non	-Derivativ	ve Securities Benefi	cially O	wned				
1. Title of Security (Instr. 4)			. Amount of Securities Beneficially Owned (Instr. )	3. Ownership		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4)	2. Date Exerc Expiration Day/ (Month/Day/	ate	3. Title and Amount of S Underlying Derivative S (Instr. 4)				Form: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date	Expiration		Amount or Number of	Derivative Security				

#### Explanation of Responses:

#### Remarks:

No securities are beneficially owned.

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<u>/s/ Renate Plawner</u> Tannenbaum <u>03/22/2022</u>

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (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.