FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPR	OVAL
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	on 30(h) c	of the	Investment	Com	pany Act	of 1940							
1. Name and Address of Reporting Person*  Arnold Charlotte C.  (Last) (First) (Middle)  C/O ANI PHARMACEUTICALS, INC.  210 MAIN STREET WEST					Issuer Name and Ticker or Trading Symbol     ANI PHARMACEUTICALS INC [ ANIP ]      Indeed the state of Earliest Transaction (Month/Day/Year) 04/01/2014									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  Vice President and CFO					
(Street) BAUDETTE MN 56623 (City) (State) (Zip)				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
		Tab	le I - Nor	n-Deriv	ative	e Se	curities	Ac	quired, [	Disp	osed o	f, or B	ene	ficiall	y Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				ear) i	2A. Deemed Execution Date, if any (Month/Day/Yea		Transaction Disposed Code (Instr. 5)			ties Acqui d Of (D) (Ir			5. Amour Securitie Beneficia Owned F	s illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A) (D)	or	Price	Reported Transact (Instr. 3 a	tion(s)					
		-	Table II -						uired, Di , options						Owned				
1. Title of Derivative Security (Instr. 3)  1. Title of Conversion or Exercise (Instr. 3)  2. Conversion or Exercise or Exercise (Instr. 3)  2. Conversion or Exercise (Instructive Security)		3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date, T	I. Transa Code (I		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s lly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		kpiration ate	Title	OI N Of	umber					
Option to	\$33	04/01/2014			Α		12,000		(1)	03	3/31/2024	Common	1	2,000	\$ <del>0</del>	12,00	0	D	

## **Explanation of Responses:**

1. Options vest in equal annual installments on the first, second, third and fourth anniversaries of the grant date.

/s/ Jane A. Meyer, as attorney

in fact

04/04/2014

\*\* 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.