Edgar Filing: ANI PHARMACEUTICALS INC - Form 4/A

ANI PHARM. Form 4/A July 29, 2013	ACEUTICALS	SINC	3							
FORM	4								APPROVAL	
Washington, D.C. 20549						N OMB Number:	3235-0287			
Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section 16(a) of th					RITIES ne Securities E	xchang	Estimated burden ho response.	Estimated average burden hours per response 0.5		
obligations may contin <i>See</i> Instruc 1(b).	ue. Section 170			•	ding Company t Company Ac			ion		
(Print or Type Re	esponses)									
1. Name and Address of Reporting Person <u>*</u> MANGANO ROSS J			2. Issuer Name and Ticker or Trading Symbol ANI PHARMACEUTICALS INC [ANIP]			-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/12/2013				X_ Director 10% Owner Officer (give title Other (specify below) below)			
Filed			Filed(Mo	4. If Amendment, Date Original Filed(Month/Day/Year) 07/16/2013			 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)	Tab	ole I - Non-l	Derivative Secur	ities Ac	quired, Disposed	of, or Beneficia	ally Owned	
	. Transaction Date Month/Day/Year)		Date, if	Code (Instr. 8)	4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5 (A) or	5) (1 1	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount (D)	Price				
Reminder: Repor	rt on a separate line	e for each cl	ass of sec	urities bene	Persons wh information required to	no resp i conta respor	indirectly. oond to the coll ined in this for nd unless the fo ly valid OMB c	m are not orm	SEC 1474 (9-02)	
	Tab	le II - Deriv	vative Sec	curities Acc	uired, Disposed	of, or B	Seneficially Owne	ed		

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of 8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities I

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		A)	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A) (· /	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to Purchase	\$ 1.06	07/12/2013		А	20,000		<u>(1)</u>	07/11/2023	Common Stock	20,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
MANGANO ROSS J C/O ANI PHARMACEUTICALS, INC. 210 MAIN STREET WEST BAUDETTE, MN 56623	Х					
Signatures						
/s/ Roland S. Chase, as attorney in fact	07/29/	07/29/2013				

Explanation of Responses:

**Signature of Reporting Person

- * 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).

Date

(1) Option vests over a four year period beginning on the first anniversary of the grant date.

Remarks:

This Amendment is being filed solely to include Exhibit 24.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.