## Edgar Filing: PRZYBYL ARTHUR - Form 5

PRZYBYL A Form 5	ARTHUR											
January 02, 2	018											
FORM						OMB APPROVAL						
				RITIES AND EXCHANGE COMMISSION				OMB Number:	3235-	0362		
Check this box if Was no longer subject				shington, D.C. 20549					Expires:	Januai	ry 31, 2005	
may continue. <i>See</i> Instruction				SHIP OF S	Estimated a burden hou response	average Irs per	1.0					
1(b). Form 3 Ho Reported Form 4 Transaction Reported	<sup>ldings</sup> Section 17(a	) of the P	ublic Ut		g Compa	ny A	ct of		n			
1. Name and Address of Reporting Person2. Issuer NPRZYBYL ARTHURSymbol				Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
			ANI PH [ANIP]	PHARMACEUTICALS INC P]				(Check all applicable)				
				nent for Issuer's Fiscal Year Ended Day/Year) 2017				X Director 10% Owner X Officer (give title Other (specify below) below)				
	IARMACEUTICA MAIN STREET							Pre	sident & CEO			
				endment, Date Original 6. Individu hth/Day/Year)					or Joint/Group Reporting			
								(chec	k applicable line	)		
BAUDETTE	E, MN 56623							_X_ Form Filed by Form Filed by I Person	One Reporting P More than One R			
(City)	(State) (	Zip)	Table	e I - Non-Deri	vative Sec	uritie	s Acqu	ired, Disposed of	f, or Beneficial	lly Owned	d	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or			5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 2 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	ial hip	
Common Stock	12/20/2017	Â		G	Amount 850	(D) D	Price \$ 0	(Instr. 3 and 4) 209,983	D	Â		
	ort on a separate line ficially owned directly			contained in	n this for	n are	e not re	llection of info equired to resp Ilid OMB contro	ond unless		C 2270 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

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

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. D S B O E I S F i (I
				(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
PRZYBYL ARTHUR C/O ANI PHARMACEUTICALS, INC. 210 MAIN STREET WEST BAUDETTE, MN 56623		ÂX	Â	President & CEO	Â				
Signatures	5								
/s/ Arthur Przybyl	01/02/2018								
<u>**</u> Signature of Reporting Person	Date								

## **Explanation of Responses:**

\* 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 provided 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.