## Edgar Filing: BIOSANTE PHARMACEUTICALS INC - Form 4

#### BIOSANTE PHARMACEUTICALS INC

Form 4 June 21, 2013

# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION ON Washington, D.C. 20549

OMB Number: 3235-0287

**OMB APPROVAL** 

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

burden hours per response... 0.5

See Instruction 1(b).

(Print or Type Responses)

I			2. Issuer Name and Ticker or Trading Symbol BIOSANTE PHARMACEUTICALS INC [BPAX]				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last)  C/O BIOSA PHARMAG MAIN STR	ANTE CEUTICALS, INC	(Month/I 06/19/2	3. Date of Earliest Transaction (Month/Day/Year) 06/19/2013				Director 10% Owner Selfont of the control of the c			
BAUDETT (City)	(Street) TE, MN 56623 (State)	Filed(Mo	nth/Day/Yea		onveiting A	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
1.Title of Security (Instr. 3)	2. Transaction Date	- Tau	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or Code V Amount (D) Price			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)			
Common Stock	06/19/2013		A	435,241	A (1)	435,241	D			
Common	06/10/2013		E	145 620	D (2)	280 612	D			

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

F

145,629 D

(2)

06/19/2013

Stock

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SEC 1474

(9-02)

289,612

D

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#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amoun	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A manuat		
									Amount		
						Date	Expiration		Or		
						Exercisable	Exercisable Date	Title Number of			
				C + V	(A) (D)						
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

Marken James G. C/O BIOSANTE PHARMACEUTICALS, INC. 210 MAIN STREET W. BAUDETTE, MN 56623

Vice President, Operations

## **Signatures**

Roland S. Chase, as attorney-in-fact

06/21/2013

\*\*Signature of Reporting Person

## **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).
- On June 19, 2013, the issuer's wholly-owned subsidiary merged with ANIP Acquisition Company d/b/a ANI Pharmaceuticals, Inc. (ANI).
- (1) Holders of ANI's series D preferred stock received shares of the issuer's common stock as merger consideration. The reporting person received these shares of BioSante common stock in exchange for ANI series D preferred stock in the merger.
- (2) Represents shares withheld for tax purposes.

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.

Reporting Owners 2