FORM 4

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

OMB APPROVAL
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).

STATEMENT OF CHANGES IN 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

Print or Type Responses) 1. Name and Address of Reporting Person * Riedhammer Thomas M			2. Issuer Name and Ticker or Trading Symbol Ohr Pharmaceutical Inc [OHRP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)XDirector10% Owner						
(Last) (First) (Middle) C/O OHR PHARMACEUTICAL INC., 800 THIRD AVENUE, 11TH FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 06/25/2014				-	Office	r (give title belo	ow)	Other (specify be	elow)		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				-	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
	EW YORK, NY 10022 (City) (State) (Zip)			Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of S (Instr. 3)	(Instr. 3)		2. Transaction Date (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	nt of Securities ally Owned Following I Transaction(s)		6. Ownership Form:	Beneficial
				(Month/Day/Year	Code	V	Amoun	(A) or (D)	Price	(Instr. 3 and 4)				Ownership (Instr. 4)
	Stock, \$0	.0001 par	06/25/2014		P		6,900	A	\$ 7.39	9 124,667 (1)			D	
Reminder:	Report on a s	separate line for	each class of secur	rities beneficially o	wned dire	Pers	ons wh	o respo			ction of int			474 (9-02)
	Report on a s	separate line for	Table II - I	Derivative Securi	ties Acqui	Pers cont the f	ons wh ained ir orm dis	o responting this for this for Ber	rm are currer reficiall	not requ ntly valid	ired to res	ormation spond unle trol numbe	ss	474 (9-02)
Reminder:	·	3. Transaction Date (Month/Day/)	Table II - 1 3A. Deemed Execution Da	Derivative Securi e.g., puts, calls, w	ties Acqui arrants, o	Perscont the f	ons wh ained ir orm dis	o responding this for splays a of, or Bertible secutive sable on Date	rm are currer neficiall arities) 7. Tir Amo Unde Secu	not requ ntly valid	OMB conf	spond unle	of 10. Ownersh Form of Derivativ Security: Direct (I or Indire	11. Nature of Indire Beneficity (Instr. 4)

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Riedhammer Thomas M C/O OHR PHARMACEUTICAL INC. 800 THIRD AVENUE, 11TH FLOOR NEW YORK, NY 10022	X				

Signatures

/s/ Thomas M. Riedhammer	06/27/2014
**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).
- (1) Includes 58,333 shares issuable pursuant to options which are not currently exercisable.

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.