FORM 4

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

OMB APPROVAL
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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 Ty	pe Responses	s)														
1. Name and Address of Reporting Person* Backenroth Samuel				2. Issuer Name and Ticker or Trading Symbol Ohr Pharmaceutical Inc [OHRP]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)Director10% Owner				
(Last) (First) (Middle) C/O OHR PHARMACEUTICAL INC., 800 THIRD AVE., 11TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 06/20/2016							X Officer (give title below) Other (specify below) Chief Financial Officer					
(Street) NEW YORK, NY 10022				4. If Amendment, Date Original Filed(Month/Day/Year)							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)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year			Execution Date, if Co				(A) or Disposed of (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						(Code	V	Amour	(A) or (D)	Price				(I) (Instr. 4)	
Commor \$0.0001	Stock, par per share	r value	06/20/2016				P		10	A	\$ 2.89	138,709			D	
Common Stock, par value \$0.0001 per share		06/20/2016				P		8	A	\$ 2.88	138,717		D			
Common Stock, par value \$0.0001 per share		06/20/2016				P		450	A	\$ 2.87	139,167		D			
Common Stock, par value \$0.0001 per share		06/20/2016				P		1,800	A	\$ 2.84	140,967	0,967		D		
Common Stock, par value \$0.0001 per share		06/20/2016				P		200	A	\$ 2.71	141,167	,		D		
Reminder:	Report on a s	separate line fo	or each class of secur Table II - 1					Pers cont the f	ons whained i	no respo n this fo splays a	rm are curre	not requesting ntly valid	ction of inf uired to res OMB con	spond unl	ess	1474 (9-02)
T	1	T	(e.g., puts		warrai	-	tions	, conver	tible secu	rities)		1	1		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year) any (Month/Day/Year)		4. Transaction Code Year) (Instr. 8)		of Deri Secu Acq (A) o Disp of (I (Inst	Number		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Und Secu	itle and ount of erlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form o Derivat Securit Direct (or India	Ownersh (y: (Instr. 4)
				Co	ode V	(A)	(D)	Date Exer		Expiratio Date	n Title	Amount or Number of Shares				

Reporting Owners

	Relationships				
	Director	10% Owner	Officer	Other	
Reporting Owner Name / Address					

Backenroth Samuel C/O OHR PHARMACEUTICAL INC. 800 THIRD AVE., 11TH FLOOR NEW YORK, NY 10022 Chief Financial Office
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Signatures

/s/ Samuel Backenroth	06/21/2016
**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 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.