FORM 4

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

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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

Name and Address of Reporting Person Backenroth Samuel				2. Issuer Name and Ticker or Trading Symbol Ohr Pharmaceutical Inc [OHRP]					5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
C/O OHI	AVE., 11TH FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 02/03/2014						X Officer (give title below) Other (specify below) CFO & VP of Bus. Development			7)		
NEW YO	ORK, NY	(Street)		4. If An	nendme	ent, Date	Origi	inal Filed(M	onth/Day/Year)		Form filed by	One Reporting P	Filing(Check A Person Deporting Person	pplicable Line)
(Cit	ty)	(State)	(Zip)			Ta	able I	- Non-Deri	vative Securi	ies Acquire	d, Disposed	of, or Benef	icially Owned		
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year) any		ate, if (I		8) (3	Amount (D)	Ov (In	Amount of Sound Following Amount of Sound Following ansaction(s) astr. 3 and 4)		. (F I (Ownership orm:	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Reminder:	Report on a s	senarate line for eacl	n class of securities h	eneficial	lly own	ned direc	tly or	indirectly							
Reminder:	Report on a s	separate line for eacl	n class of securities b	- Deriva	itive Se	ecurities	Acqı	Person in this a curre		required to IB control reficially Ov	respond ι number.		on containe form display		474 (9-02)
1. Title of Derivative Security (Instr. 3)	2.	3. Transaction Date (Month/Day/Year)	Table II 3A. Deemed Execution Date, if	- Deriva (e.g., p 4. Transac Code	tive Se uts, cal 5. tion Do Se or (D	ecurities alls, warr . Number Derivative ecurities acquired (rants, r of e	Person in this a curre uired, Dispo	form are not ntly valid Of osed of, or Be nvertible secu- ercisable and Date	required to IB control reficially Ov	o respond unumber. wned d Amount ying	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	10. Ownersk Form of Derivati Security Direct (I or Indire	ip of Indire Benefici Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II 3A. Deemed Execution Date, if any	- Deriva (e.g., p 4. Transac Code	tive Se uts, cal 5. tion Do Se or (D	ecurities alls, warr . Number Derivative ecurities acquired r Dispose D) Instr. 3, 4	rants, r of e	Person in this is a curre uired, Dispo options, co	form are not not yalid Of osed of, or Be novertible securicisable and Date y/Year)	required to IB control reficially Overities) 7. Title and of Underly Securities	o respond unumber. wned d Amount ying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownersh Form of Derivati Security Direct (I or Indire	11. Natur of Indire Benefici Ownersh (Instr. 4)

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Backenroth Samuel C/O OHR PHARMACEUTICAL INC. 800 THIRD AVE., 11TH FLOOR NEW YORK, NY 10022			CFO & VP of Bus. Development		

Signatures

/s/ Samuel Backenroth	12/08/2014
**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) These options to purchase common stock of the issuer are exercisable over a four year period with 1/4 of the options granted vesting on an annual basis commencing on February 3, 2014.
- (2) Granted pursuant to the Company's 2014 Stock Incentive Plan.
- (3) Includes 4,699 Shares of Common Stock.

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 no	ot required to respond unless the form displays a currently valid OMB number.