

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

OMB APPROVAL				
OMB Number:	3235-0104			
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nours per response				

#### INITIAL STATEMENT OF 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)			<u>.</u>							
Name and Address of Reporting Person *     Slakter Jason Scott	Stateme	2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol Ohr Pharmaceutical Inc [OHRP]						
(Last) (First) (Middle) C/O OHR PHARMACEUTICAL, INC.,, 800 THIRD AVE., 11TH FLO		I			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			5. If Amendment, Date Original Filed(Month/Day/Year)		
NEW YORK, NY 10022				Officer (give title Other (specify below)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person			
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned								
1.Title of Security (Instr. 4)			Beneficially Owned (Instr. 4) (		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock, par value \$0.0001 per share		425,	425,505		I	By SKS Ocular, LLC				
Common Stock, par value \$0.0001 per share		34,9	34,943		D					
Reminder: Report on a separate line for each c  Persons who res unless the form  Table II - Deriv	pond to the displays a cu	collection of rrently valid	information OMB contro	contained in t I number.	this form are no					
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable and Expiration Date (Month/Day/Year)		te	d 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversio or Exercise Price of Derivative	Form Deriv Secur	vative rity:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Exercisable	Expiration Date	Title	Amount or Number of Sha	Amount or Number of Shares	Indire	direct (D) or direct (I) nstr. 5)			
Warrant	12/18/2012	05/18/2015	Common Stock	16,667	\$ 2.85		D			

### **Reporting Owners**

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Slakter Jason Scott C/O OHR PHARMACEUTICAL, INC., 800 THIRD AVE., 11TH FLOOR NEW YORK, NY 10022	X				

# **Signatures**

/s/ Jason S. Slakter	01/08/2015
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. \*\* 7099(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.