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

	OMB APPROVAL							
	OMB Number:	3235-0362						
	Estimated average burden							
S	hours per response	1.0						

subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 3 Holdings Reported

Form 4 Transactions

Reported

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES hours per response...

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person * HIRSCHMAN ORIN	2. Issuer Name and Ticker or Trading Symbol Ohr Pharmaceutical Inc [OHRP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First)		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 09/30/2014				Year)	Officer (give title below) Ot	her (specify belo	ow)	
C/O OHR PHARMACEUTICAL, IN THIRD AVENUE, 11TH FL.		0,700,201.								
(Street)	4	4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Reporting (check applicable line)				
NEW YORK, NY 10022							_X_Form Filed by One Reporting Person Form Filed by More than One Reporting Person			
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acqu					uired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transaction Code (Instr. 8)	4. Securi (A) or Di (Instr. 3,	(A) or		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	Ownership Form:	Beneficial Ownership	
Common Stock, \$0.0001 per share	04/30/2014(1)		G	23,300	D	\$ 0	1,673,948 (2)	I	By AIGH	

owned directly or indirectly.

Reminder: Report on a separate line for each class of securities beneficially Persons who respond to the collection of information contained in this form are SEC 2270 (9-02) not required to respond unless the form displays a currently valid OMB control number.

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

Security (Instr. 3)	Conversion	Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	5. Numl of Deriv Secur Acqu (A) o Dispo of (D (Instr 4, and	rative rities ired rosed) . 3,	6. Date Exercis Expiration Dat (Month/Day/Y	e	7. Title and of Underlyin Securities (Instr. 3 and	Underlying urities Security Control of Security Control of Security Securities Securitie		Beneficial			
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Common Stock, purchase options	\$ 1.71						01/23/2015	03/09/2017	Common Stock	100,000		100,000	D		

Reporting Owners

	Relationships						
Reporting Owner Name / Address		10% Owner	Officer	Other			
HIRSCHMAN ORIN C/O OHR PHARMACEUTICAL, INC. 800 THIRD AVENUE, 11TH FL. NEW YORK, NY 10022	X						

Signatures

/s/ Orin Hirschman	01/23/2015
**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) On April 30, 2014, the reporting person made a gift of 2,900 shares to each of eight minor children in custodial accounts with himself as custodian. These shares are included in his beneficial ownership above.
- (2) Includes options and warrants.
- (3) Includes shares and warrants owned indirectly through AIGH Investment Partners LLC ("AIGH") and custodial accounts for Mr. Hirschman's children. Mr. Hirschman is the sole member of AIGH and is solely responsible for investment and voting decisions. Includes options owned directly by Mr. Hirshman.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.