NIGALAYE ASHOK G Form 4

May 04, 2012

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* NIGALAYE ASHOK G

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to

Issuer

below)

Symbol

ELITE PHARMACEUTICALS INC

(Check all applicable)

/NV/ [ELTP]

(Last) (First) (Middle)

C/O EPIC PHARMA, LLC, 227-15

(Street)

(State)

NORTH CONDUIT AVENUE

3. Date of Earliest Transaction

X Director X 10% Owner \_ Other (specify \_X\_\_ Officer (give title

(Month/Day/Year)

05/02/2012

Chief Scientific Officer

4. If Amendment, Date Original

Code V

J(3)

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

LAURELTON, NY 11413

(City)

Common

Stock

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

(Zip)

3. 4. Securities Acquired (A) or TransactiorDisposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

Amount

9,214,097

5. Amount of Securities Beneficially Owned Following

Price

0.0369

Ownership Form: Direct (D) or Indirect

I (1)

7. Nature of Indirect Beneficial Ownership

(Instr. 4)

(A) or

(D)

D

Reported (I) Transaction(s)

(Instr. 4) (Instr. 3 and 4)

27,777,304

(2)

see footnote (1)

05/04/2012

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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**SEC 1474** (9-02)

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

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4.

Derivative Security (Instr. 3)	Conversion or Exercise Price of	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transactic Code (Instr. 8)	orDerivative Securities Acquired (A) or		Expiration Date (Month/Day/Year)		Underlying Securitie (Instr. 3 and 4)	
,	Derivative Security		,	,	Disp	osed of (D) r. 3, 4, and 5)				
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amou Numb Shares
Warrants	\$ 0.0625	05/02/2012		J <u>(4)</u>		4,533,334	06/03/2009	06/03/2016	Common	4,53

Deletionship

Chief Scientific Officer

5. Number of

6. Date Exercisable and

7. Title and Amount

### **Reporting Owners**

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

X

NIGALAYE ASHOK G C/O EPIC PHARMA, LLC 227-15 NORTH CONDUIT AVENUE LAURELTON, NY 11413

## **Signatures**

1. Title of 2.

Ashok Nigalaye 05/04/2012

\*\*Signature of Person Date

# **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

3. Transaction Date 3A. Deemed

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- Ashok G. Nigalaye is an equity owner and executive officer of each of Epic Pharma, LLC ("EP"), and Epic Investments, LLC ("EI")

X

- (1) (which is controlled by EP), which owns securities convertible into or exercisable for in excess of 10% of the outstanding shares of common stock of the issuer, and also serves as a director of the issuer.
- (2) Of the 27,777,304 shares of common stock, 27,137,722 shares of common stock are owned indirectly through EI and 639,582 shares are owned directly by the reporting person.
- (3) Distribution of shares by EI to its members
- (4) Distribution of warrants by EI to its members

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.

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