

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

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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

1. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Shah Nikita					Ar	nne	al Ph	armace	utic	als, I	nc. [A	AMRX]		Í			
(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)							Director 10% Owner S Officer (give title below) Other (specify below)							
C/O AMNEA INC., 400 CI 3RD FLOOI	ROSSING							5/	7/20)19			SV	P, Chief H	IR Office	r		
	(Stre	et)			4. I	f Ar	nendm	ent, Date (Origi	nal Fil	ed (MM/	DD/YYYY	6. I	ndividual o	or Joint/G	roup Filing	(Check Appl	icable Line)
BRIDGEWATER, NJ 08807 (City) (State) (Zip)											_X	X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
	,) (2		•	I - Non-	Der	ivat	ive Sec	curities Ac	equir	red, Di	isposed	of, or Bo	enefici	ially Own	ed			
1. Title of Security (Instr. 3)			2. Trans. E	Executi		A. Deemed (Instr. 8)		ode	or Disp	orities Accoosed of (13, 4 and 5		5. Amount of Securit Following Reported (Instr. 3 and 4)		ties Beneficially Owned Transaction(s)		Ownership of Ind Form: Benef	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amour	(A) o	r Price					or Indirect (I) (Instr. 4)		
Class A Common Stock 5/7/2019					,		M		4441 (1)	A	<u>(2)</u>	170477		D				
Class A Common Stock 5/7/2019				9		F		1366 (3)	D	\$13.44	169111		D					
	Tab	le II - Deri	ivative :	Securit	ies I	Bene	eficially	y Owned ((e.g.	, puts	, calls, v	warrants	s, optic	ons, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deer Executio Date, if a	on (Inst	Secu (A) (D)		Derivati Securiti (A) or I (D)		6. Date Exercisable and Expiration Date			Underly e Securi	Underlying Derivative Security		9. Number of derivative Securities Beneficially Owned Following	Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	ode	V (A	(A)	(D)	Date Exercis	cisable 1	Expiration Date	Title	N	mount or lumber of hares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)	
Restricted Stock Units	<u>(2)</u>	5/7/2019		N	1			4441		<u>(4)</u>	<u>(4)</u>	Class . Commo Stock	on	4441.0	\$0	13325	D	

Explanation of Responses:

- (1) Represents the gross number of shares of common stock awarded to the reporting person in connection with the vesting of restricted stock units. The actual number of shares issued was reduced by the number of shares withheld to satisfy tax withholding obligations. See footnote 3.
- (2) Each restricted stock unit represents a contingent right to receive one share of the Issuer's Class A Common Stock.
- (3) Represents shares of common stock withheld to satisfy tax withholding obligations relating to the vesting of restricted stock units.
- (4) On May 7, 2018, the reporting person was granted 17,766 restricted stock units, vesting in four equal installments beginning on the first anniversary of the grant date. The restricted stock units do not expire.

Reporting Owners

Panarting Owner Name / Address		Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Shah Nikita							
C/O AMNEAL PHARMACEUTICALS, INC.			SVP, Chief HR Officer				
400 CROSSING BOULEVARD, 3RD FLOOR		SVP, Cillel HR OII					
BRIDGEWATER, NJ 08807							

Signatures

/s	Brian	Р.	Spitser,	Attorney-in-Fact
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.