

FORM 3

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

| OMB APPROVAL | |
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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)

| | | | |
|--|--|--|---|
| 1. Name and Address of Reporting Person * HOLUBIAK MYRON Z <small>(Last) (First) (Middle)</small> C/O CITIUS PHARMACEUTICALS, INC., 63 GREAT ROAD <small>(Street)</small> MAYNARD, MA 01754 <small>(City) (State) (Zip)</small> | 2. Date of Event Requiring Statement <small>(Month/Day/Year)</small> 10/01-06:00/2015 | 3. Issuer Name and Ticker or Trading Symbol Citius Pharmaceuticals, Inc. [CTXR] | |
| | | 4. Relationship of Reporting Person(s) to Issuer <small>(Check all applicable)</small> <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) | 5. If Amendment, Date Original Filed <small>(Month/Day/Year)</small> |
| | | 6. Individual or Joint/Group Filing <small>(Check Applicable Line)</small> <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person | |

Table I - Non-Derivative Securities Beneficially Owned

| | | | |
|---|---|--|---|
| 1. Title of Security <small>(Instr. 4)</small> | 2. Amount of Securities Beneficially Owned <small>(Instr. 4)</small> | 3. Ownership Form: Direct (D) or Indirect (I) <small>(Instr. 5)</small> | 4. Nature of Indirect Beneficial Ownership <small>(Instr. 5)</small> |
|---|---|--|---|

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

SEC 1473 (7-02)

| | | |
|--|---|--|
| | 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. | |
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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security <small>(Instr. 4)</small> | 2. Date Exercisable and Expiration Date <small>(Month/Day/Year)</small> | | 3. Title and Amount of Securities Underlying Derivative Security <small>(Instr. 4)</small> | | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) <small>(Instr. 5)</small> | 6. Nature of Indirect Beneficial Ownership <small>(Instr. 5)</small> |
|--|--|------------------|---|----------------------------|--|---|---|
| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | |
| Options to Purchase Common Stock | <u>(1)</u> | 10/01-06:00/2025 | Common Stock | 400,000 | \$ 0.54 | D | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|--|---------------|-----------|---------|-------|
| | Director | 10% Owner | Officer | Other |
| HOLUBIAK MYRON Z C/O CITIUS PHARMACEUTICALS, INC. 63 GREAT ROAD MAYNARD, MA 01754 | X | | | |

Signatures

| | |
|---------------------------------------|---------------------|
| /s/ Myron Holubiak | 10/27-06:00/2015 |
| <small>Signature of Reporting</small> | <small>Date</small> |

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. 78ff(a).

The option granted shall vest and become exercisable as follows: the option to purchase 40,000 shares of common stock of the Company (the "Common Stock") vested on October 1, 2015, and the balance of the option, or the option to purchase 360,000 shares of (1) Common Stock shall vest in twelve (12) equal installments commencing on December 31, 2015, provided that the Reporting Person continues to serve as a member of the Company's Board of Directors as of those dates. The maximum number of shares of Common Stock subject to the grant shall be 400,000. The Option was issued pursuant to the Company's 2014 Stock Incentive Plan.

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.