

# 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 * Mazur Leonard L		2. Date of Event Requiring Statement (Month/Day/Year) 09/12-06:00/2014	3. Issuer Name <b>and</b> Ticker or Trading Symbol Citius Pharmaceuticals, Inc. [CTXR]		
(Last)	(First) (Middle)		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) CEO, President and COO	5. If Amendment, Date Original Filed(Month/Day/Year)	
C/O CITIUS PHARMACEUTICALS, INC., 63 GREAT ROAD					6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
(Street) MAYNARD, MA 01754					
(City)	(State)	(Zip)	<b>Table I - Non-Derivative Securities Beneficially Owned</b>		

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	457,143	D	

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.**

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Options to Purchase Common Stock	(1)	09/12-06:00/2024	Common Stock	1,800,000	\$ 0.45	D	

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Mazur Leonard L C/O CITIUS PHARMACEUTICALS, INC. 63 GREAT ROAD MAYNARD, MA 01754	X		CEO, President and COO	

## Signatures

	10/28-06:00/2015
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/s/ Leonard Mazur

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. 78ff(a).

(1) The option granted shall vest and become exercisable as follows: the option to purchase 300,000 shares of common stock of the Company (the "Common Stock") vested on September 12, 2014, the option to purchase 500,000 shares of Common Stock vested on September 12, 2015; the option to purchase 500,000 shares of Common Stock shall vest on March 12, 2016; the option to purchase 500,000 shares of Common Stock shall vest on September 12, 2016; and the option to purchase 500,000 shares of Common Stock shall vest on September 12, 2017. The maximum number of shares of Common Stock subject to the grant shall be 3,300,000. 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.