

TITAN PHARMACEUTICALS INC  
 Form 3  
 October 03, 2007

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
 Expires: January 31, 2005  
 Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

|                                           |         |                                      |                                                                                                                                                                                                                             |                                                      |
|-------------------------------------------|---------|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|
| 1. Name and Address of Reporting Person * |         | 2. Date of Event Requiring Statement | 3. Issuer Name <b>and</b> Ticker or Trading Symbol                                                                                                                                                                          |                                                      |
| Â Rubin Marc                              |         | (Month/Day/Year)                     | TITAN PHARMACEUTICALS INC [AMEX - TTP]                                                                                                                                                                                      |                                                      |
| (Last)                                    | (First) | (Middle)                             | 4. Relationship of Reporting Person(s) to Issuer                                                                                                                                                                            | 5. If Amendment, Date Original Filed(Month/Day/Year) |
|                                           |         | 10/01/2007                           |                                                                                                                                                                                                                             |                                                      |
| 400 OYSTER POINT                          |         |                                      | (Check all applicable)                                                                                                                                                                                                      |                                                      |
| BLVD.,Â SUITE 505                         |         |                                      | <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner<br><input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other<br>(give title below)    (specify below)<br>President & Chief Ex Officer |                                                      |
| (Street)                                  |         |                                      | 6. Individual or Joint/Group Filing(Check Applicable Line)                                                                                                                                                                  |                                                      |
| SO. SAN                                   |         |                                      | <input checked="" type="checkbox"/> Form filed by One Reporting Person                                                                                                                                                      |                                                      |
| FRANCISCO,Â CAÂ 94080                     |         |                                      | <input type="checkbox"/> Form filed by More than One Reporting Person                                                                                                                                                       |                                                      |
| (City)                                    | (State) | (Zip)                                |                                                                                                                                                                                                                             |                                                      |

**Table I - Non-Derivative Securities Beneficially Owned**

| 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                    | 100,000                                               | D                                                        | Â                                                     |

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) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--------------------------------------------|----------------------------------------------------------|-----------------------------------------------------------------------------|--------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------|
|--------------------------------------------|----------------------------------------------------------|-----------------------------------------------------------------------------|--------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------|

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|                                                | Date Exercisable | Expiration Date | Amount or Number of Shares | or Indirect (I) (Instr. 5) |
|------------------------------------------------|------------------|-----------------|----------------------------|----------------------------|
| Option to Purchase Common Stock (Right to Buy) | 10/02/2017       | 10/02/2017      | 1,500,000                  | D                          |
|                                                |                  |                 | \$ 2.4                     |                            |
|                                                |                  | Common Stock    |                            |                            |

## Reporting Owners

| Reporting Owner Name / Address                                                    | Relationships |           |                              |       |
|-----------------------------------------------------------------------------------|---------------|-----------|------------------------------|-------|
|                                                                                   | Director      | 10% Owner | Officer                      | Other |
| Rubin Marc<br>400 OYSTER POINT BLVD.,<br>SUITE 505<br>SO. SAN FRANCISCO, CA 94080 |               |           | President & Chief Ex Officer |       |

## Signatures

/s/ Marc Rubin                      10/02/2007  
 \*\*Signature of                      Date  
 Reporting Person

## 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 options will vest monthly over a four (4) year period, so that 100% of the options will be vested on 10/01/2011.

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.