FORM 4

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

OMB APPR	OVAL
OMB Number:	3235-0287
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houre per reenonce	0.5

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

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 IIIIt OI I J	pe Response	s)													
1. Name and Address of Reporting Person *- WEIS KONRAD M PHD				2. Issuer Name and Ticker or Trading Symbol TITAN PHARMACEUTICALS INC [TTP]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 400 OYSTER POINT BLVD., SUITE 505				3. Date of Earliest Transaction (Month/Day/Year) 09/01/2004							Officer (giv	e title below)		er (specify belo	ow)
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year) 09/02/2004						_X_	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				
SO. SAN FRANCISCO,, CA 94080 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqu						s Acquired	ured, Disposed of, or Beneficially Owned				
1.Title of S (Instr. 3)	Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea			2A. Deemed Execution Date, if		Date, if (3. Transaction 4. Code (A (Instr. 8)		Securities Acquired A) or Disposed of (D) nstr. 3, 4 and 5) (A) or mount (D) Price		5. Amount of Securities Benef Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Reminder:	Report on a s	separate line for each		Derivati	ive S	Securities	Acq	Persons in this for displays uired, Dispo	s who respon orm are not re s a currently sed of, or Bene	equired to valid OMB	respond control r	unless th		ned SEC	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code	tion	5. Numb	er ative es d (A) sed	6. Date Exer Expiration I (Month/Day	Date	7. Title and of Underly Securities (Instr. 3 ar	ring		9. Number Derivative Securities Beneficially Owned Following Reported Transaction	Owners Form of Derivati Security Direct (or Indire	Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	Execution Date, if any	4. Transact Code	tion	5. Numb of Deriving Securities Acquired or Dispo of (D) (Instr. 3,	er ative es d (A) sed	6. Date Exer Expiration I (Month/Day	rcisable and Date /Year) Expiration	7. Title and of Underly Securities	ring	Derivative Security	Derivative Securities Beneficially Owned Following Reported	Owners Form of Derivati Security Direct (or Indire	hip of Indire Benefici Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	Execution Date, if any	4. Transact Code (Instr. 8)	tion	5. Numb of Deriving Securities Acquired or Dispond of (D) (Instr. 3, and 5)	eer attive es d (A) ssed 4,	6. Date Exer Expiration I (Month/Day	rcisable and Date /Year) Expiration	7. Title an of Underly Securities (Instr. 3 ar	Amount or Number of Shares	Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction	Owners Form of Derivati Security Direct (or Indirects)	hip of Indire Benefici Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
WEIS KONRAD M PHD 400 OYSTER POINT BLVD., SUITE 505 SO. SAN FRANCISCO,, CA 94080	X					

Signatures

Konrad Weis	09/14/2004
**Signature of Reporting Person	Date

Explanation of Responses:

* 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)
- (1) These options vest in equal monthly installments over a 48-month period commencing on the date of grant.
- (2) These options vest in equal installments over a 12-month period commencing on the date of grant.

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.