FORM 4	4
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Check this box if no	
longer subject to	STATE
Section 16. Form 4 or	
Form 5 obligations	
may continue. See	Filed pur
Instruction 1(b).	r neu pui

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

MENT OF CHANGES IN BENEFICIAL OWNERSHIP OF
SECURITIES

OMB APPROVAL OMB 3235-Number: 0287 Estimated average burden hours per 0.5 response...

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 Respon	ises)										
1. Name and Address BHONSLE SUNI	2. Issuer Na Symbol TITAN PH [TTP]				U	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner _X_ Officer (give title Other (specify below)					
(Last) (I C/O TITAN PHA INC, 400 OYSTE	3. Date of Eau (Month/Day/ 11/03/2005		isact	ion			EVP and COO				
S SAN FRANCIS	4. If Amendm Filed(Month/Da		e Ori	ginal		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (i	State) (Zip)		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Exect any		med 3. Transactio Code Day/Year) (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price		D) 1 5)	Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
Common Stock	11/03/2005			Р		9,900	А	\$ 1.52	90,294 <u>(1)</u>	D	
Common Stock									100,000	I	As Trustee for Family Trust
Damin dam Damant an	. 11 . 6		c	1 6	. 11	1					

Reminder: Report on a separate directly or indirectly. each class of so ecurities beneficially

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exe	rcisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	Number a		and Expiration Date		Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of ((Month/Day/Year)		Underlying		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	Derivative		Securities (Inst		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					Secu	Securities ((Instr. 3 and			Owned	Security:	(Instr. 4)	
	Security					Acqu	Acquired		4)			Following	Direct (D)		
						(A) c	(A) or			1			Reported	or Indirect	
						Disp	Disposed						Transaction(s)	(I)	
						· · ·	of (D)						(Instr. 4)	(Instr. 4)	
						(Instr. 3,									
						4, and 5)									
											Amount				
								Date	Expiration		or				
								Exercisable	Expiration Date	Title	Number				
								LACICISAUL	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

Demonstring Open on Norma / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
BHONSLE SUNIL C/O TITAN PHARMACEUTICALS INC 400 OYSTER POINT BLVD S SAN FRANCISCO, CA 94080	х		EVP and COO					

Signatures

-Signature of Reporting Person

11/07/2005 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) Does not include 10,000 shares of common stock beneficially owned by the reporting person's adult son.

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.