FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
stimated average burden					
ours per response	0.5				

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

	pe Response	es)														
1. Name and Address of Reporting Person *- SMITH LEY S				2. Issuer Name and Ticker or Trading Symbol TITAN PHARMACEUTICALS INC [TTNP.OB]							31	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
400 OYSTER POINT BLVD., SUITE 505				3. Date of Earliest Transaction (Month/Day/Year) 12/14/2015							Officer (give	e title below)	Oth	er (specify below	v)	
(Street) SO. SAN FRANCISCO, CA 94080				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_	6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(Cit	ty)	(State)	(Zip)	Table I - Non-Derivative Securities Acqu					Acquired	uired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			2A. Deemed Execution Date, r) any (Month/Day/Ye		ate, if	3. Tra: Code Instr.	8)	(A) or (Instr.	4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5) (A) or Amount (D) Pric		Owned Following Repo Transaction(s) (Instr. 3 and 4)		ed	Ownership of I Form: Ber	Beneficial Ownership	
Reminder:	Report on a	separate line for eac	Table II -	Derivativ	ve Se	ecurities	s Acq	Perso conta form o	ns w ined displa	tho respond in this form ays a curre	n are not ntly vali icially O	required d OMB co	to respon	id unless th		474 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	(Month/Day/Year)	ransaction 3A. Deemed Execution Date, if	4. 5. N If Transaction of Code Der It (Instr. 8) See Acc (A) Dis (D) (Instr. 8) Transaction of		5. Num of Derivat Securit Acquir (A) or Dispos (D)	Number 6. Dat Expirative divided or posed of str. 3, 4,		ons, convertible securi ate Exercisable and iration Date nth/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownersh Form of Derivativ Security: Direct (I or Indire	(Instr. 4)
												or				
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Number of Shares				

Reporting Owner Name / Address	Relationships						
reporting oviner runne, runness	Director	10% Owner	Officer	Other			
SMITH LEY S 400 OYSTER POINT BLVD., SUITE 505 SO. SAN FRANCISCO, CA 94080	X						

Signatures

/S/ Ley S. Smith	12/15/2015
**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).

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.