## FORM 4

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

OMB APPROVAL
OMB 3235Number: 0287
Estimated average
burden hours per

response...

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

(Print or Ty	pe Respon	ses)													_		
	nd Address LL ROBE	Symbol TITAN PH	2. Issuer Name and Ticker or Trading Symbol TITAN PHARMACEUTICALS INC [AMEX - TTP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% OwnerX_ Officer (give title Other (specify below)									
(Last) (First) (Middle) 400 OYSTER POINT BLVD., SUITE 505			TE (Month/Day/	3. Date of Earliest Transaction (Month/Day/Year) 04/27/2007					Exec Vice President and CFO								
(Street) SO. SAN FRANCISCO, CA 94080			Filed(Month/Da	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(S	tate) (Zip)	Table I - I	Non-Der	ivati	ive Secu	ırities	Acqui		Disposed							
1.Title of S (Instr. 3)	Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transact Code (Instr. 8)	)	4. Secu Acquir Dispos (Instr.	red (A sed of 3, 4 a (A or	(D) nd 5)	Sec Ber Fol Tra (Ins	Amount of nurities neficially O lowing Rep nsaction(s) str. 3 and 4	orted	6. Owner Form: Direct or Indi (I) (Instr.	ship of Be (D) Ov rect (In	Nature Indirect neficial vnership str. 4)			
Common	Stock	04/27/2007		Р		15,50		\$ 2.14	111	1,580		D			_		
Reminder: directly or		a separate line for ea	ich class of securitie	s benefici	Pe infe	rsons ormati quired	on co to re	ontaine spond	ed in unle	the colle this form ess the fo trol numb	n are rm di	not		EC 1474 (9-02)			
			erivative Securitie	_		_				-	i						
1. Title of Derivative Security (Instr. 3) Price of Derivativ Security		3. Transaction Date (Month/Day/Yea	3A. Deemed Execution Date, ir) (Month/Day/Yea	4. f Transa Code	4. Transaction Code		5. Number a		Exercisable piration Date //Day/Year)		Amo Unde Secu	le and unt of rrlying rities : 3 and		y Sectors (Sectors) Ben Own Foll Rep Tran	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form of Derivative	11. Natur of Indirec Beneficial Ownershi (Instr. 4)
				Code	· V	(A)		Date Exercis	able	Expiration Date		Amount or Number of Shares					

#### **Reporting Owners**

	Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address		Director	10% Owner	Officer	Other			
	FARRELL ROBERT EDWARD 400 OYSTER POINT BLVD., SUITE 505 SO. SAN FRANCISCO, CA 94080			Exec Vice President and CFO				

## **Signatures**

/s/ Robert E. Farrell	04/27/2007
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.