FORM 4

4

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

OMB APPROVAL
OMB 3235Number: 0287
Estimated average

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

(Print or Type Responses)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

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. Name and Address BUCALO LOUIS	2. Issuer Na Symbol TITAN PH [TTP]					IC	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X Officer (give title Other (specify below)				
C/O TITAN PHA INC, 400 OYSTE	(monun buy)	Year)	isaci	tion			below) Pres. & Chief Exec. Officer				
SO. SAN FRANC	Filed(Month/Da	4. If Amendment, Date Original Filed(Month/Day/Year)						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) (S	State) (Zip)	Table I -	Non-Der	ivat	ive Secur	ities 1	Acqui	red, Disposed of, or	Beneficially	Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transact Code (Instr. 8		4. Securi Acquired Disposed (Instr. 3,	d (A) d of (A) 4 and (A) or	D)	5. Amount of Securities Beneficially 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)	
Common Stock	10/06/2005		P		61,200	A	\$ 1.7	495,686	D		
Common Stock	10/06/2005		Р		800	A	\$ 1.69	496,486	D		
Reminder: Report on directly or indirectly.	a separate line for ea	ach class of securitie	s benefic	ially	owned						
				inf red	ormation	n cor res	itaine pond	nd to the collection ed in this form are r unless the form dis control number.	not	SEC 1474 (9-02)	
		Perivative Securitie									
1. Title of 2.	3. Transaction	3A. Deemed	4.		5.	6	. Date	Exercisable 7. Titl		Price of 9. Number	

1. Title of	2.	3. Transaction	3A. Deemed	4.	5	i.		6. Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n N	Numb	er	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	o	of		(Month/Day	/Year)	Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Γ	Deriva	ative			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				S	Securi	ties			(Inst	: 3 and		Owned	Security:	(Instr. 4)
	Security				Α	Acqui	red			4)			Following	Direct (D)	
					(.	A) or							Reported	or Indirect	
					Γ	Dispo	sed						Transaction(s)	(I)	
					o	of (D)							(Instr. 4)	(Instr. 4)	
					()	Instr.	3,								
					4	, and	5)								
											Amount				
								Date	Expiration		or				
								Exercisable	Expiration Date	Title	Number				
								LACICISADIC	Date		of				
				Code	<i>I</i> ((A)	(D)				Shares				

Reporting Owners

Donouting Oromon Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
BUCALO LOUIS R MD C/O TITAN PHARMACEUTICALS INC 400 OYSTER POINT BLVD SO. SAN FRANCISCO, CA 94080	X		Pres. & Chief Exec. Officer					

Signatures

/s/Louis R. Bucalo	10/06/2005
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.