Edgar Filing: MANHATTAN PHARMACEUTICALS INC - Form 4

MANHATTA Form 4 August 02, 2 FORM									PROVAL	
Washington, D.C. 20549 OMB								0		
WEISER MICHAEL Symbol MANHA			suer Name and Ticker or Trading ol NHATTAN RMACEUTICALS INC [MHA]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 810 SEVEN	(First) (M THAVENUE		of Earliest Tr Day/Year) 2007	ansaction			X Director Officer (give below)		Owner er (specify	
NEW YORF	Ionth/Day/Year) Ap _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					
(City) 1.Title of Security (Instr. 3) Common Stock	2. Transaction Date		3. Transactio Code	4. Securit on(A) or Dis (Instr. 3, 4	ies Ac sposed	quired of (D)	uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 2,247,563	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

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

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Amou Unde Secur	le and unt of rlying ities 5. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Add	ress	Relationships						
	Director	10% Owner	Officer	Other				
WEISER MICHAEL 810 SEVENTH AVENUE NEW YORK, NY 10019	Х							
Signatures								
/s/ Michael Weiser	08/01/2007							
<u>**</u> 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.