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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL Washington, D.C. 20549 OMB 323

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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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 ALLEN RICHAR		2. Issuer Name and Ticker or Trading Symbol TITAN PHARMACEUTICALS INC [TTP]					IC	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) 10% Owner _X Officer (give title Other (specify below)					
(Last) (First) (Middle) 50 DIVISION STREET, # 502			3. Date of Earliest Transaction (Month/Day/Year) 01/05/2005					below) Executive Vice President					
(Street) SOMERVILLE, NJ, NJ 08876			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) (i	(City) (State) (Zip)			Table I - Non-Derivative Securities Acqui						ired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Exect any	Deemed ution Date, if th/Day/Year)	Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		D) 15)	Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Insta.4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	01/05/2005			Code M	V	Amount 25,617	A	Price \$ 0.08	30,382	(Instr. 4) D			

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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, c	convertible securities)
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	(e.g., puts, cans, warrants, options, convertible securities)														
1. Title of	2.		3A. Deemed	4.				6. Date Exerci					9. Number of		11. Nature
	Conversion		Execution Date, if					Expiration Da		of Underlyi	ing	Derivative		Ownership	
Security	or Exercise	(Month/Day/Year)	any	Code		Deri	vative	(Month/Day/Y	rear)	Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Secu	irities			(Instr. 3 and	d 4)	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acq	uired						Owned	Security:	(Instr. 4)
	Security					(A)	or						Following	Direct (D)	
						Dist	osed of						Reported	or Indirect	
						(D)							Transaction(s)	(I)	
							tr. 3, 4,							(Instr. 4)	
						and							((
				1			- /				A				
											Amount				
								Date	Expiration		or				
								Exercisable	Date		Number				
											of				
				Code	V	(A)	(D)				Shares				
Employee															
Stock															
	¢ 0.00	01/05/0005					25 (17	01/10/2000	01/10/2005	Common Stock	05 (17		0	D	
Option	\$ 0.08	01/05/2005		Μ			25,617	01/19/2000	01/19/2005	Stock	25,617	<u>(1)</u>	0	D	
(right to										Stock					
buy)															

Reporting Owners

Benewting Owner Name / Address	Relationships						
Reporting Owner Name / Address		10% Owner	Officer	Other			
ALLEN RICHARD C 50 DIVISION STREET, # 502 SOMERVILLE, NJ, NJ 08876			Executive Vice President				

Signatures

/s/ Richard C. Allen	01/06/2005	
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).

(1) No price applies.

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.