FORM 4

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

OIVID APPR	OVAL				
OMB Number:	3235-0287				
Estimated average burden					
hours per response.	0.5				

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 Type Responses) 1. Name and Address of Reporting Person * Rubin Marc				2. Issuer Name and Ticker or Trading Symbol TITAN PHARMACEUTICALS INC [TTNP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_Director 10% Owner					
400 OYS		(First) NT BLVD., SUIT		3. Date of Earliest Transaction (Month/Day/Year) 02/10/2021			X	X Officer (give title below) Other (specify below) Executive Chairman						
(Street)			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					
	GAN FRANCISCO, CA 94080 (City) (State) (Zip)			Table I. Non Designating Committee Asset										
1.Title of Security 2. Transaction Date					3. Transaction Code (Instr. 8)				Juried, Disposed of, or Beneficially Own 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		eficially 6	6. 7. Nature Ownership Form: Beneficial		
				(Month	n/Day/Year)	Code	e V A	(A) or (D)	(Inst	(Instr. 3 and 4) Direct or Indi (I)		r Indirect (Ir	wnership nstr. 4)	
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Reminder: R	ceport on a sc	•					in this f	orm are not r	equired to	respond u				74 (9-02)
1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction	3A. Deemed Execution Date, if any	4. Transact	5. Numl Derivati Securiti	rrants, per of ve	in this f a currer nired, Dispo options, co	orm are not rently valid OMI sed of, or Beneavertible securicisable and Date	equired to B control noticially Own ities) 7. Title and of Underlying Securities	respond u umber. ned	8. Price of Derivative Security	9. Number of Derivative Securities	10. Ownership Form of	11. Nati
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Reporting Owners

	Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Rubin Marc 400 OYSTER POINT BLVD., SUITE 505 SAN FRANCISCO, CA 94080	X		Executive Chairman	

Signatures

/S/ Marc Rubin	02/10/2021
**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) The options vest as to 75,000 shares on August 10, 2021 with the balance to vest in equal monthly installments over the 18 months thereafter.

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.