Vanda Pharmaceuticals Inc.

Form 4

August 23, 2007

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

3235-0287 Number:

January 31, Expires: 2005

burden hours per

Estimated average response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

08/21/2007(1)

08/21/2007(1)

Stock

Stock

Common

1. Name and Address of Reporting Person * SHALLCROSS STEVEN A			Issuer Name and Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer			
			nda Pharmaceuticals Inc. [VNDA	(Check all applicable)			
(Last)	(First) (Date of Earliest Transaction	D'			
9605 MED SUITE 300	OICAL CENTER I	•	onth/Day/Year) 21/2007	Director 10% Owner X Officer (give title Other (specify below) below) Sr. VP, CFO, Treasurer			
	(Street)	4. I	Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
		File	d(Month/Day/Year)	Applicable Line)			
ROCKVIL	LE, MD 20850			_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Ac	quired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deemed Execution Da any (Month/Day/Y	Code (Instr. 3, 4 and 5)	5. Amount of 6. 7. Nature of Securities Ownership Indirect Beneficially Form: Direct Beneficial Owned (D) or Ownership Following Indirect (I) (Instr. 4) Reported (Instr. 4) Transaction(s)			
Common			Code V Amount (D) Price	(Instr. 3 and 4)			
Common Stock	08/21/2007 <u>(1)</u>			3 250 D			

50

3,300

D

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

M

S

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

3,300

\$ 15.21 0

D

D

Edgar Filing: Vanda Pharmaceuticals Inc. - Form 4

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number proof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	of Derivative Expiration Date Gecurities (Month/Day/Year) Acquired A) or Disposed of D) Instr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy)	\$ 0.8274	08/21/2007(1)		M	3,250	<u>(2)</u>	11/14/2015	Common Stock	3,250
Employee Stock Option (Right to Buy)	\$ 4.7329	08/21/2007(1)		M	50	(2)	12/29/2015	Common Stock	50

Reporting Owners

Reporting Owner Name / Address		Relationships		
	Director	10% Owner	Officer	Other

SHALLCROSS STEVEN A 9605 MEDICAL CENTER DRIVE, SUITE 300 ROCKVILLE, MD 20850

Sr. VP, CFO, Treasurer

Signatures

/s/ Steven A. Shallcross 08/23/2007

**Signature of Reporting 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) Transaction was administered pursuant to an authorized 10b5-1 plan.

(2)

Reporting Owners 2

Edgar Filing: Vanda Pharmaceuticals Inc. - Form 4

Exercisable with respect to 25% of the shares one year after the grant, exercisable with respect to an additional 2.08333% of the aggregate shares each month 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.