GIANAKAKOS ANASTASIOS

Form 3

October 04, 2007

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

OMB APPROVAL

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SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person *

 GIANAKAKOS

ANASTASIOS

(Last) (First) (Middle)

C/O MAP PHARMACEUTICALS. INC., 2400 BAYSHORE

PARKWAY, SUITE 200

(Street)

MOUNTAIN VIEW, CAÂ 94043

(State)

(Zip)

(Instr. 4)

1. Title of Security

(City)

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

Statement

(Month/Day/Year) 10/04/2007

4. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

MAP Pharmaceuticals, Inc. [MAPP]

Director 10% Owner X_ Officer Other (give title below) (specify below)

6. Individual or Joint/Group SVP, COR & Business Dev

Filing(Check Applicable Line) _X_ Form filed by One Reporting Person

5. If Amendment, Date Original

Filed(Month/Day/Year)

Form filed by More than One

Reporting Person

4. Nature of Indirect Beneficial

Table I - Non-Derivative Securities Beneficially Owned

2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership Form:

Ownership (Instr. 5)

Direct (D) or Indirect (I) (Instr. 5)

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

SEC 1473 (7-02)

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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(Instr. 4)

1. Title of Derivative Security

(Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security**

Conversion or Exercise Price of

5. Ownership Form of Derivative

6. Nature of Indirect Beneficial Ownership

(Instr. 5)

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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	
Stock Option (Right to Buy)	(1)	10/16/2016	Common Stock	166,971	\$ 0.74	D	Â
Stock Option (Right to Buy)	(2)	05/01/2017	Common Stock	30,767	\$ 6.39	D	Â

Reporting Owners

Reporting Owner Name / Address		Relationships					
. 0	Director	10% Owner	Officer	Other			
GIANAKAKOS ANASTASIOS							
C/O MAP PHARMACEUTICALS, INC.	â	â	SVP, COR & Business Dev	â			
2400 BAYSHORE PARKWAY, SUITE 200	А	A	A SVF, COR & Busiless Dev	A			
MOUNTAIN VIEW, CA 94043							

Signatures

/s/ Anastasios
Gianakakos

**Signature of Reporting
Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).
- The option is exercisable as it vests: 25% of the total number of option shares granted vests and becomes exercisable on the first anniversary from the vesting commencement date, which is September 29, 2006. Thereafter, the remaining 75% of the total number of option shares vests and becomes exercisable in equal installments cumulatively each month over 36 months, so that the entire number of option shares becomes fully vested and exercisable on the fourth anniversary from the vesting commencement date.
- The option is exercisable as it vests: 25% of the total number of option shares granted vests and becomes exercisable on the first anniversary from the vesting commencement date, which May 2, 2007. Thereafter, the remaining 75% of the total number of option shares vests and becomes exercisable in equal installments cumulatively each month over 36 months, so that the entire number of option shares becomes fully vested and exercisable on the fourth anniversary from the vesting commencement date.

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.

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