| SEC 2 | Form 4 |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

| 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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB Number: 3235-0287 Estimated average burden 0.5 hours per response

| 1. Name and Address of Reporting Person [*] McGuinness Michael | | | 2. Issuer Name and Ticker or Trading Symbol <u>MANHATTAN PHARMACEUTICALS</u> <u>INC</u> [MHA] | | tionship of Reporting Pers all applicable) Director Officer (give title below) | son(s) to Issuer 10% Owner Other (specify below) | | | |
|--|---------|-------|---|---|--|---|--|--|--|
| | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/25/2007 | | Chief Financial | , | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| NEW YORK | NY | 10019 | | X | Form filed by One Repo | orting Person | | | |
| | | | | | Form filed by More thar Person | One Reporting | | | |
| (City) | (State) | (Zip) | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code (| | 4. Securities A Disposed Of (5) | | | Securities | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|--------|---|--|---------------|--|------------|---|---|
| | | | Code | v | Amount | (A) or (D) | | | | |
| Common Stock | | | | | | | | 0 | D | |

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. Transa Code (8) | | Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|------------|-----|--|--------------------|---|-------------------------------------|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |
| Stock Options ⁽¹⁾ | \$0.7 | | | | | | | (2) | 07/10/2016 | Common Stock | 220,000 | | 220,000 | D | |
| Stock Options ⁽¹⁾ | \$1.35 | | | | | | | (3) | 07/10/2016 | Common Stock | 60,000 | | 60,000 | D | |
| Stock Options ⁽¹⁾ | \$0.95 | 04/25/2007 | | A | | 320,000 | | (4) | 04/25/2017 | Common Stock | 320,000 | \$0 | 320,000 | D | |

Explanation of Responses:

1. Pursuant to Section 16b-3 (right to buy).

2. Option vests as follows: 73,334 shares on 7/10/07 and 73,333 shares each on 7/10/08 and 7/10/09.

3. 20,000 shares vest on each of 7/10/07, 7/10/08 and 7/10/09.

4. 106,667 shares vest on each of 4/25/08 and 4/25/09; 106,666 shares vest on 4/25/10.

/s/ Michael G. McGuinness ** Signature of Reporting Person 04/26/2007 Date

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

* 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.

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 Number.