FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	DVAL						
	OMB Number:	3235-0287						
	Estimated average burden							
l	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).

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

1. Name and Address of Reporting Person* ROSENWALD LINDSAY A MD				2. Issuer Name and Ticker or Trading Symbol MANHATTAN PHARMACEUTICALS INC [MHTT]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director								
(Last) 787 SEV	(Fi ENTH AVE	rst) (ENUE, 48TH FL	Middle)			3. Date of Earliest Transaction (Month/D 04/07/2005									belov	below					
(Street) NEW YC			10019 (Zip)		4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicabl Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3)		2. Transact Date (Month/Day		Execu /Year) if any		A. Deemed xecution Date, any //onth/Day/Year)		ction Instr.			d (A) or r. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price	•	Transact (Instr. 3 a	ion(s)			Instr. 4)		
Common	Stock														2,682	2,318	1	t t	Owned by certain rusts for he benefit of the Reporting Person ⁽¹⁾		
Common	Stock														8	0]		Owned by Spouse		
Common	Stock														3	8	1	t J	Owned by June Street Company ⁽²⁾		
Common	Stock														3	8]		Owned by Huntington Street Company ⁽²⁾		
Common Stock														3	3]	t []	Owned by he Reporting Person's children ⁽³⁾			
Common Stock 04			04/07/2	04/07/2005				P		4,000	A	\$1.	.55	2,568,321		Ι)				
			04/07/2)							
		Ta	able II -								osed of, o				Owned						
Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any				4. Transac Code (Ir 8)	Transaction Code (Instr. B) Se Ac (A) Dis		sed 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4)		D S (I	Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e C S Illy C C	.0. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
-valonatic:	of Respons				Code	v	(A)	(D)	Date Exercis	able	Expiration Date		Amoun or Numbe of Shares								

- 1. Shares owned by three trusts for the benefit of the Reporting Person; however, Lester Lipshultz, and not the Reporting Person, has voting and dispositive control over the shares owned by these three trusts. Accordingly, the Reporting Person disclaims beneficial ownership of these shares, except as to any pecuniary interest therein.
- $2.\ A$ corporation of which the Reporting Person is the sole shareholder.
- 3. Does not include 5,387,450 shares of common stock and 25,524 shares of Series A Convertible Preferred Stock (which is convertible into 232,036 shares of Common Stock), which are owned by certain trusts for the benefit of the Reporting Person's children. The Reporting Person disclaims beneficial ownership of these shares, except to any pecuniary interest therein. The shares owned by the trusts are reported on a separate Form 4, prepared by the trustee/investment manager.

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.