## Edgar Filing: MAP Pharmaceuticals, Inc. - Form 4

MAP Pharmac Form 4	ceuticals, Inc.									
January 24, 20	008									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								т	PPROVAL	
Washington, D.C. 20549							N OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction See In						nge Act of 1934, of 1935 or Sectio	January 31, 2005 Estimated average burden hours per response 0.5			
<i>See</i> Instruc 1(b).	ction	50(II)	of the f	nvestmen	. Compa	IY ACT OF I	940			
(Print or Type Re	esponses)									
1. Name and Ad Friedman Cha	2. Issuer Name <b>and</b> Ticker or Trading Symbol MAP Pharmaceuticals, Inc. [MAPP]				5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First) (1	Middle)					(Che	eck all applicable)		
C/O MAP PHARMACEUTICALS, INC., 2400 BAYSHORE PARKWAY, SUITE 200			3. Date of Earliest Transaction (Month/Day/Year) 01/22/2008				Director 10% Owner Officer (give title Other (specify below) VP President, Gen Counsel &Sec			
MOUNTAIN	4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tal	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of. or Beneficia	llv Owned	
	. Transaction Date Month/Day/Year)	Execution any	ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, 4	ies (A) or of (D)	5. Amount of Securities Beneficially Owned		7. Nature of Indirect	
Reminder: Repor	rt on a separate line	for each cl	ass of sec	eurities bene	Perso inform requir	ns who res nation cont red to respo nys a curre	or indirectly. spond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tabl					posed of, or convertible s	Beneficially Owned securities)	1		

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount	of 8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	s D

## Edgar Filing: MAP Pharmaceuticals, Inc. - Form 4

Security or Exercise (Instr. 3) Price of Derivative Security	any (Month/Day	y/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed o (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		4) (		
			Code V	(A) (D	) Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Stock Option \$13.12 0 (Right to Buy)	1/22/2008		А	30,000	<u>(1)</u>	01/21/2018	Common Stock	30,000		
Reporting Owners										
Reporting Owner Name / Address			Relationships							
		Director	10% Own	er Officer	Other					
Friedman Charlene A C/O MAP PHARMACEUTICALS, INC. 2400 BAYSHORE PARKWAY, SUITE 200 MOUNTAIN VIEW, CA 94043			VP President, Gen Counsel &Sec							
Signatures										
/s/ Charlene A. Friedman	01/23/2008									

\*\*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).

The option is exercisable as it vests: 25% of the total number of option shares vests and becomes exercisable on January 22, 2009.

(1) Thereafter, 1/48th of the total number of option shares becomes exercisable cumulatively on the 22nd day of each following month for 36 months so that the entire number of option shares becomes fully vested and exercisable on January 22, 2012.

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.

C