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MANHATTAN PHARMACEUTICALS INC

Form 4

January 31, 2007

FORM 4

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

OMB Number:

5. Relationship of Reporting Person(s) to

3235-0287

if no longer

Check this box

January 31, Expires: 2005

OMB APPROVAL

subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response... 0.5

Form 5 obligations may continue. See Instruction

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

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

Herskowitz	Neil			ATTAN MACEUT	TICALS	INC	[МНА	Issuer (C	Theck all applic	able)
(Last) (First) (Middle) 2109 BROADWAY, SUITE 206			3. Date of Earliest Transaction (Month/Day/Year) 01/30/2007						X Director Officer (give title below) below)	
NEW YOR	(Street) K, NY 10023			endment, D nth/Day/Yea		al		Applicable Line _X_ Form filed	or Joint/Group less by One Reporting by More than On	g Person
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities A	cquired, Dispose	d of, or Benefi	cially Owned
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)) Execution any		3. Transactic Code (Instr. 8)	4. SecurionAcquirect Disposed (Instr. 3,	l (A) o l of (E))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock						(-)		44,168	I	By ReGen Capital II (1)
Common Stock								21,700	I	By Riverside Contracting, LLC (2)
Common Stock (4)	01/30/2007			A	6,338	A	(3)	16,338	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form

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displays a currently valid OMB control 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 of or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		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
Stock Options	\$ 0.97					<u>(5)</u>	09/27/2014	Common Stock	80,000
Director Stock Option	\$ 1					<u>(6)</u>	01/11/2015	Commn Stock	11,010
Director Stock Option	\$ 0.71	01/30/2007		A	50,000	<u>(7)</u>	01/30/2017	Common Stock	50,000

Reporting Owners

Reporting Owner Name / Address	Kelationships						
	Director	10% Owner	Officer	Other			
Herskowitz Neil							
2109 BROADWAY, SUITE 206	X						
NEW YORK, NY 10023							

Signatures

/s/ Neil

Herskowitz 01/31/2007

**Signature of Person Date

Reporting Person

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).

Dalationshin

- (1) An entity of which the Reporting Person is a member holding 50%.
- (2) A limited liability company of which the Reporting Person is a 50% owner.

Reporting Owners 2

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- (3) Stock issued in lieu of Director's fees due; based on closing stock price on January 30, 2007.
- (4) Under the 2003 Stock Option Plan
- (5) 26,667 shares vest on each of 9/27/04 and 9/27/05 and 26,666 shares vest on 9/27/06.
- (6) 3,670 shares vest on each of 1/11/05, 1/11/06, and 1/11/07.
- (7) 16,667 shares vest on each of 1/30/07 and 1/30/08; 16,666 shares vest on 1/30/09.

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.