SLOAN GAIL A Form 4 April 27, 2005

# FORM 4

#### **OMB APPROVAL** UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB**

Check this box if no longer subject to

Washington, D.C. 20549

3235-0287 Number: January 31,

Section 16. Form 4 or

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

2005 Estimated average burden hours per

Expires:

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

response... 0.5

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * SLOAN GAIL A			2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer		
			LA JOLLA PHARMACEUTICAL CO [LJPC]	(Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	Director 10% OwnerX_ Officer (give title Other (specify		
6455 NANCY RIDGE DRIVE			04/25/2005	below) below) VP of Finance		
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
SAN DIECO, CA 02121			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting		
SAN DIEGO, CA 92121				Person		
(City)	(State)	(Zip)	Table I Non Desirative Committee Ac	avived Dianaged of an Beneficially Owned		

(City)	(State)	(Zip) Tabl	e I - Non-D	erivative Sec	urities Acq	uired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities on(A) or Dispo (Instr. 3, 4 at	osed of (D)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	C	A) or O) Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	03/31/2005	03/31/2005	J V	656 A	·	13,956	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 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)

### Edgar Filing: SLOAN GAIL A - Form 4

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 orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	erivative Expiration Date (Month/Day/Year) equired (A) Disposed of (b) nstr. 3, 4,		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 Option (right to buy)	\$ 0	04/25/2005		A	52,920	(2)	04/25/2015	Common Stock	52,920	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Troporous o wher runner runner	Director	10% Owner	Officer	Other			
SLOAN GAIL A							
6455 NANCY RIDGE DRIVE			VP of Finance				
SAN DIEGO, CA 92121							

## **Signatures**

/s/ Gail A. Sloan 04/27/2005

\*\*Signature of 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).
- (1) Acquired pursuant to the Company?s Employee Stock Purchase Plan.
- The stock options vest and become exercisable monthly over the next three years. In the event employee is terminated without cause or there is a change in control of the Company and employee's employment is terminated in connection with such change in control, the options automatically vest as of the date of employee's termination and remain exercisable for a period of one year following the date of termination.

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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