SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287

By LP⁽¹⁾

I⁽¹⁾

Estimated average burden

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

obligation Instruction	ons may contin ion 1(b).	ue. See		Fi							rities Excha		1934			hours	per res	sponse:	0.5
1. Name and Address of Reporting Person* TANG KEVIN C					2.1	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol Vanda Pharmaceuticals Inc. [VNDA]								ationship c k all applic Directo	able)	g Pers X	on(s) to Issi		
(Last) 4401 EAS	(Fii STGATE M	,	Middle)				of Earli 2009	iest Trar	isaction (Mont	h/Day/Year)				Officer below)	(give title		Other (s below)	specify
(Street) SAN DIE (City)			92121 Zip)		- 4.1	If Ame	endme	nt, Date	of Origin	al File	ed (Month/D	ay/Year)		6. Indi ⁿ Line) X	Form fi	led by One led by Mor	e Repo	(Check App orting Person One Repon	n
		Tab	le I - N	on-Deri	vativ	e Se	ecurit	ties A	cquired	d, D	isposed	of, or B	enefic	ially	Owned				
		2. Transaction Date (Month/Day/Year)		Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar				Beneficia Owned Fo		s For ally (D) following (I)		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)
Common	Stock			10/13/	/2009				S		542,072	2 D	\$12.	7637	3,12	3,780		I ⁽¹⁾	By LP ⁽¹⁾
Common	Common Stock 10/15/24			/2009				S		57,928	D	\$11	.804	3,06	5,852		I ⁽¹⁾	By LP ⁽¹⁾	
		٦	Table II								posed of convert				wned		-		
Derivative Conversion Date Exec Security or Exercise (Month/Day/Year) if any		3A. Deer Executio if any (Month/E	ned	4. Transa	nsaction de (Instr.		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		nt 8	3. Price of Derivative Security Instr. 5)	9. Numbe derivative Securitie: Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy J	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownershi (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amour or Numbe of Sha	er					
Call Options	\$15	10/13/2009			S			3,000	10/13/20	009	01/16/2010	Common	300,0	00	\$1.05	26,78	9	I ⁽¹⁾	By LP ⁽¹⁾

Common Stock

01/16/2010

300,000

\$1.5091

3,000

Call Options (obligations to sell)	\$12.5	10/13/2009				
1. Name and Address of Reporting Person*						

s

3,000

10/13/2009

TANG KEVIN C (Eirct)

to sell)

(Last)	(First)	(Middle)					
4401 EASTGATE MALL							
(Street)							
SAN DIEGO	CA	92121					
(City)	(State)	(Zip)					
1. Name and Address	s of Reporting Pers	on*					
TANG CAPIT	AL MANAC	EMENT LLC					
·							
(Last)	(First)	(Middle)					
4401 EASTGATE MALL							
(Street)							
SAN DIEGO	CA	92121					
(City)	(State)	(Zip)					
1. Name and Address of Reporting Person* TANG CAPITAL PARTNERS LP							

(Last) 4401 EASTGAT	(First) E MALL	(Middle)
(Street) SAN DIEGO	CA	92121
(City)	(State)	(Zip)

Explanation of Responses:

1. The securities are held by Tang Capital Partners, LP. Kevin C. Tang is the sole manager of Tang Capital Management, LLC, which is the general partner of Tang Capital Partners, LP. Mr. Tang disclaims beneficial ownership of the securities except to the extent of his pecuniary interest therein.

Remarks:

/s/ Kevin C. Tang10/15/2009/s/ Kevin C. Tang, Managing
Member10/15/2009/s/ Kevin C. Tang, as Managing
Member of Tang Capital
Management, LLC, General
Partner10/15/2009** Signature of Reporting PersonDate

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.