

GIANAKAKOS ANASTASIOS
 Form 3
 October 04, 2007

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *			2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â GIANAKAKOS			(Month/Day/Year)	MAP Pharmaceuticals, Inc. [MAPP]	
ANASTASIOS			10/04/2007		
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)
C/O MAP			(Check all applicable)		
PHARMACEUTICALS,			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner		
INC.,Â 2400 BAYSHORE			<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other		
PARKWAY, SUITE 200			(give title below) (specify below)		
(Street)			SVP, COR & Business Dev		
MOUNTAIN			6. Individual or Joint/Group Filing(Check Applicable Line)		
VIEW,Â CAÂ 94043			<input checked="" type="checkbox"/> Form filed by One Reporting Person		
(City)	(State)	(Zip)	<input type="checkbox"/> Form filed by More than One Reporting Person		

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	
Stock Option (Right to Buy)	Â (1)	10/16/2016	Common Stock	166,971	\$ 0.74	D	Â
Stock Option (Right to Buy)	Â (2)	05/01/2017	Common Stock	30,767	\$ 6.39	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
GIANAKAKOS ANASTASIOS C/O MAP PHARMACEUTICALS, INC. 2400 BAYSHORE PARKWAY, SUITE 200 MOUNTAIN VIEW, CA 94043	Â	Â	Â SVP, COR & Business Dev	Â

Signatures

/s/ Anastasios Gianakakos 10/04/2007

__Signature of Reporting Person Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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) The option is exercisable as it vests: 25% of the total number of option shares granted vests and becomes exercisable on the first anniversary from the vesting commencement date, which is September 29, 2006. Thereafter, the remaining 75% of the total number of option shares vests and becomes exercisable in equal installments cumulatively each month over 36 months, so that the entire number of option shares becomes fully vested and exercisable on the fourth anniversary from the vesting commencement date.

(2) The option is exercisable as it vests: 25% of the total number of option shares granted vests and becomes exercisable on the first anniversary from the vesting commencement date, which May 2, 2007. Thereafter, the remaining 75% of the total number of option shares vests and becomes exercisable in equal installments cumulatively each month over 36 months, so that the entire number of option shares becomes fully vested and exercisable on the fourth anniversary from the vesting commencement date.

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.