SCOLR Pharma, Inc. Form 4

April 13, 2005

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

Check this box if no longer subject to

Section 16. Form 4 or

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

(Print or Type Responses)

PINES WAYNE L

(Last)

1(b).

1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading

> Symbol SCOLR Pharma, Inc. [DDD]

(Middle)

(First) C/O SCOLR PHARMA, INC., 3625

- 132ND AVENUE S.E., SUITE 300

(Street)

(City) (State) (Zip)

2. Transaction Date 2A. Deemed

1.Title of Security (Instr. 3)

BELLEVUE, WA 98006

(Month/Day/Year)

Execution Date, if (Month/Day/Year)

Code (Instr. 8)

3. Date of Earliest Transaction

4. If Amendment, Date Original

(Month/Day/Year)

Filed(Month/Day/Year)

3.

03/31/2005

TransactionAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5)

4. Securities

(A)

or Code V Amount (D) Price 3235-0287

**OMB APPROVAL** 

**OMB** Number:

Expires:

January 31, 2005

Estimated average burden hours per

response...

0.5

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

X\_ Director 10% Owner Officer (give title Other (specify below)

6. Individual or Joint/Group Filing(Check

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Reported

Transaction(s)

(Instr. 3 and 4)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 5. Amount of 7. Nature of 6. Ownership

Securities Form: Direct Indirect Beneficially (D) or Indirect Beneficial Owned (I) Ownership Following

(Instr. 4)

(Instr. 4)

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)

1. Title of Derivative Conversion Security or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year)

Execution Date, if any

5. Number Transaction of Derivative Expiration Date Code Securities

6. Date Exercisable and (Month/Day/Year)

7. Title and Amount of 8 **Underlying Securities** (Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security	(Month	h/Day/Year)	(Instr.		Acquired (A) or Disposed (D) (Instr. 3, and 5)	d of				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy) (1)	\$ 2.12	03/31/2005		A		1,767		03/31/2005	03/30/2015	Common Stock	1,767

Relationshine

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
NES WAYNE L						

PINES WAYNE L C/O SCOLR PHARMA, INC. 3625 - 132ND AVENUE S.E., SUITE 300 BELLEVUE, WA 98006

## **Signatures**

Wayne L. Pines by Gail Vitulli,
Attorney-in-Fact

\*\*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).
- In accordance with the Company's 2004 Equity Incentive Plan, Mr. Pines elected to receive stock options (with an exercise price of 50% of the average closing price of the common stock on the 10 trading days preceding the date of grant) in lieu of cash compensation for services as a director.
- (2) Not applicable.

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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