Edgar Filing: NEOSE TECHNOLOGIES INC - Form 4

NEOSE TE Form 4 March 15, 2	CHNOLOGIES	INC										
FORM									OMB AF	PROVAL		
-	UNITEL) STATES			AND EXCH , D.C. 2054		GE CC	OMMISSION	OMB Number:	3235-0287		
Check th if no lon	ger									January 31, 2005		
subject t Section Form 4 o	o SIAIE 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Estimated average burden hours per response 0.5		
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17	7(a) of the	Public U	tility Hol		ny A	ct of 1	Act of 1934, 935 or Section	I			
(Print or Type	Responses)											
RACHESKY MARK H MD Symbol							5. Relationship of Reporting Person(s) to Issuer					
							(Check all applicable)					
				Dav/Year)				X_ Director10% Owner Officer (give titleOther (specify below) below)				
40 WEST 5 FLOOR	7TH STREET,	24TH	03/13/2	2007			U	(10 w)	below)			
NEW VOP	(Street) K, NY 10019			endment, D nth/Day/Yea	ate Original r)		A	 Individual or Joi Applicable Line) X_ Form filed by O Form filed by M 	ne Reporting Pe	rson		
							F	Person				
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative Sec	urities	s Acqui	red, Disposed of,	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)		Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. 7. Nature of Ownership Indirect Form: Beneficial Direct (D) Ownership or Indirect (Instr. 4) (I) (Instr. 4)					
G				Code V	Amount	(D)	Price			See		
Common Stock	03/13/2007			Р	2,219,242	А	<u>(1)</u>	3,056,493	Ι	$\underbrace{(2)}{footnote}$		
Common Stock	03/13/2007			Р	256,005	А	<u>(1)</u>	367,832	I	See footnote (3)		
Common Stock								502,759	Ι	See footnote (4)		
Common								42,105	Ι	See		

Edgar Filing: NEOSE TECHNOLOGIES INC - Form 4

footnote (5)

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

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 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. Transactio Code (Instr. 8)	5. Number of orDerivative 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 Number Shares
Common Stock Purchase Warrant (right to buy)	\$ 1.96	03/13/2007		Р	998,659	03/09/2007	03/09/2012	Common Stock	998,65
Common Stock Purchase Warrant (right to buy)	\$ 1.96	03/13/2007		Р	115,202	03/09/2007	03/09/2012	Common Stock	115,20

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
RACHESKY MARK H MD 40 WEST 57TH STREET 24TH FLOOR NEW YORK, NY 10019	X						
Signatures							
Mark H. Rachesky, M.D.	03/15/200	17					
	Date						

**Signature of 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) See Exhibit 99.
- (2) See Exhibit 99.
- (3) See Exhibit 99.
- (4) See Exhibit 99.
- (5) See Exhibit 99.

Remarks:

The filing of this statement shall not be deemed an admission that any of the Reporting Persons is the beneficial owner of any

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.