# FORM 4

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

OMB APPRO	OVAL
OMB Number:	3235-0287
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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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	e Responses	,															
Name and Address of Reporting Person   Curd John G				2. Issuer Name and Ticker or Trading Symbol THRESHOLD PHARMACEUTICALS INC [THLD]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director Officer (give title below) Other (specify below)  President and CMO					
(Last) (First) (Middle) C/O THRESHOLD PHARMACEUTICALS, INC., 1300 SEAPORT BLVD. SUITE 500				3. Date of Earliest Transaction (Month/Day/Year) 10/05/2009									Presi	ient and CM	<u>)                                    </u>		
REDWO	OD CITY,	(Street) CA 94063		4. If Am	endmen	t, Dat	e Orig	inal Filed	Month/D	Oay/Year)		_X_ For	rm filed by C	ne Reporting I	Filing(Check erson eporting Person	Applicable Line	)
(City	)	(State)	(Zip)			T	able l	I - Non-D	erivati	ve Securitie	s Acqu	ired, D	Disposed o	of, or Benef	icially Owne	d	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, any (Month/Day/Ye.		e, if		nsaction 8)	4. Securities Acquire (A) or Disposed of ( (Instr. 3, 4 and 5)					/		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
				(11101111		·)	Cod	le V	Amou	(A) or (D)	Price	C		or Indirect (I) (Instr. 4)	F		
Common	Stock		10/05/2009				P <sup>(1</sup>	ח	26,1	78 A	\$ 1.86	101,9	937			D	
Reminder: F	Report on a se	eparate line for each	class of securities be	eneficiall	ly owne	d dire	ctly or			ho respon	d to th	e colle	ection of	informati	on contain	ed SEC	1474 (9-02)
Reminder: F	Report on a se	eparate line for each		- Derivat	tive Sec	uritie	es Acq	Perso in thi a cur uired, Dis	ons wi s form rently sposed	n are not ro valid OME of, or Bene	equired B contr ficially	d to re	spond u mber.		on containe form displa		1474 (9-02)
			Table II -	- Derivat	tive Sec	uritie s, war	s Acq	Perso in thi a cur uired, Dis	ons wi s form rently sposed conver	are not re valid OME of, or Bene tible securi	equired contr ficially ties)	d to re ol nur Owned	spond u mber. d	nless the	form displa	ys	, ,
1. Title of	2. Conversion or Exercise Price of Derivative Security	3. Transaction	Table II - 3A. Deemed Execution Date, if	- Derivat (e.g., pu 4. Transac Code	tive Secuts, call  5. of Se or of (In	uritie s, war	es Acquerants, per ative es d (A) osed	Perso in thi a cur uired, Dis options,	ons who so form rently sposed converting converting to the convert	of, or Benerible securi	ficially ties) 7. Tit of Ur Secur	Owned and aderlying	Amount	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners: Form of Derivati Security Direct (10 or Indirect)	in of Indirect Beneficial Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II - 3A. Deemed Execution Date, if any	- Derivat (e.g., pu 4. Transac Code	tive Secats, call  5. tion of Se ) Ac or of (Ir	Numb Deriv curitie cquired Dispo (D) astr. 3,	es Acquerants, over trative es d (A) osed , 4,	Perso in thi a cur uired, Dis options, 6. Date E Expiration	sposed conver exercisa n Date lay/Yea	of, or Benerible securi	ficially ties) 7. Tit of Ur Secur	Owned and aderlying rities	Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	of 10. Owners! Form of Derivati Security Direct (lor Indire	in of Indirect Beneficial Ownersh (Instr. 4)

## **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Curd John G C/O THRESHOLD PHARMACEUTICALS, INC. 1300 SEAPORT BLVD. SUITE 500 REDWOOD CITY, CA 94063			President and CMO			

### **Signatures**

John G. Curd by Joel Fernandes, Attorney-In-Fact	10/06/2009
**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).
- (1) Acquired from Issuer pursuant to Securities Purchase Agreement dated September 29, 2009.

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.