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

OMB APF	PROVAL
OMB Number:	3235-02

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

87 Estimated average burden hours per response... 0.5

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

1. 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)  President and CMO						
(Last) (First) (Middle) C/O THRESHOLD PHARMACEUTICALS, INC., 1300 SEAPORT BLVD. SUITE 500			3. Date of Earliest Transaction (Month/Day/Year) 05/25/2010								Presid	dent and Civic			
(Street) REDWOOD CITY, CA 94063			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person						
(City) (State) (Zip)			(Zip)	Table I - Non-Derivative Securities Acqu						es Acquire	ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea		2A. Deem Execution any (Month/Da		Date, if (		(4	Securities Acq A) or Disposed (Instr. 3, 4 and 5)	of (D) Ov	Amount of Sowned Following ansaction(s) astr. 3 and 4)			Ownership of Form:	eneficial wnership		
							Cod	le V A	(A) or (D)	Price				(nstr. 4)	11501.4)
Reminder:								Person	s who respon	d to the c	ollection of	informati	on containe	d SEC 1-	474 (9-02)
			Table II					in this facurre	form are not rently valid OMI  osed of, or Bene	equired to B control eficially Ov	o respond u number.				474 (9-02)
	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if	4. Transact	tion		rants, r of e (A) ed of	in this t a curre uired, Dispo options, co	form are not rently valid OMI   osed of, or Benominarity  reisable and  Date	equired to 3 control eficially Ovities)	o respond unumber.  wned  and Amount ying	8. Price of	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec	11. Natur p of Indired Beneficial Ownersh (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transact	tion	5. Number Derivative Securities Acquired or Dispose (D) (Instr. 3, 4	rants, r of e (A) ed of	in this is a current uired, Dispositions, confidence of the Expiration in the second of the second o	form are not rently valid OMI  seed of, or Bendenvertible securities and Date (y/Year)	equired to 3 control eficially Ovities)  7. Title ar of Underly Securities	o respond unumber.  wned  and Amount ying	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported	f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec	11. Natur p of Indired 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	05/27/2010
**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) The stock option was granted pursuant to the Threshold Pharmaceuticals, Inc. 2004 Amended and Restated Equity Incentive  $\frac{1}{2}$  Plan.
- (2) The option vests monthly over four years commencing May 25, 2010.

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.