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PHARMIO Form 4/A	N CORP						
December (06, 2007						
FORM	1 4 UNITED		CURITIES AND EXCHANGI Washington, D.C. 20549	E COMMISSION	OMB A OMB Number:	PPROVAL 3235-0287	
Check t if no lor subject Section Form 4 Form 5 obligati- may cor <i>See</i> Inst 1(b).	nger to 16. or Filed put ons stinue.	rsuant to Sectio (a) of the Public	ANGES IN BENEFICIAL O SECURITIES on 16(a) of the Securities Excha c Utility Holding Company Act e Investment Company Act of	Expires: January 3 20 Estimated average burden hours per response 0			
(Print or Type	Responses)						
	Address of Reporting	Person <u>*</u> 2. Is Symb	ssuer Name and Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer			
		PHA	RMION CORP [PHRM]	(Check all applicable)			
(Last) (First) (Middle) 2525 28TH STREET, SUITE 200			te of Earliest Transaction th/Day/Year) 6/2006	Director 10% Owner X Officer (give title Other (specify below) below) EVP, Development Operations			
	(Street)		Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
BOULDE	R, CO 80301		(Month/Day/Year) 8/2006	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Fable I - Non-Derivative Securities	Acquired, Disposed of	, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3.4. SecuritiesifTransactionAcquired (A) orCodeDisposed of (D)	5. Amount of 6. Securities Fe Beneficially (I Owned (I Following (I Reported Transaction(s) (Instr. 3 and 4)	Ownership orm: Direct D) or Indirect	7. Nature of Indirect	
Reminder: Re	port on a separate line	e for each class of s	securities beneficially owned directly				
			Persons who re	spond to the collect	tion of S	SEC 1474	

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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionDerivative		Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	(Acquired or Dispose (D) (Instr. 3, 4 and 5)	ed of				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 24.81	12/06/2006		A		28,000		<u>(1)</u>	12/06/2013	Common Stock	28,000
Restricted Stock Units	(2)	12/06/2006		А		2,800		(3)	(3)	Common Stock	2,800

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
IVERS-READ GILLIAN C 2525 28TH STREET SUITE 200 BOULDER, CO 80301			EVP, Development Operations				
Signatures							

/s/ Erle T. Mast, Attorney-in-Fact

**Signature of Reporting Person

Date

12/06/2007

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 option is exercisable in accordance with its vesting schedule. Twenty-five percent of the options vest on the first anniversary of the date of grant and 1/48th monthly thereafter.
- (2) Each restricted stock unit represents a contingent right to receive one share of Pharmion common stock.

Twenty-five percent of the restricted stock units vest on the first anniversary of the date of grant and 3/48th on each three-month (3) anniversary thereafter. Settlement of vested shares will occur as promptly as practicable following each vesting date, at which time vested

shares will be delivered to the reporting person.

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.