Edgar Filing: Tran Pierre V - Form 4

Form 4												
December 14											PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								COMMISSION	OMB	3235-0287		
Check thi		Was	hingto	on,	D.C. 205		Number: Expires:	January 31				
if no long subject to												
Section 16. Form 4 or Form 5 obligations may continue Form 5 Section 17(a) of the Public Uti					SECURITIES 6(a) of the Securities Exchange Act of 1934, tility Holding Company Act of 1935 or Section vestment Company Act of 1940						Estimated average burden hours per response 0.	
<i>See</i> Instru 1(b).	iction	50(11)	of the m	vestille	/IIU \	company	Act	01 1 74	.0			
(Print or Type R	Responses)											
			2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer			
	CORTEX PHARMACEUTICALS INC/DE/ [COR] (Che						(Checl	ck all applicable)				
(N				3. Date of Earliest Transaction (Month/Day/Year) 12/07/2007					Director 10% Owner X_ Officer (give title Other (specify below) below) Chief Medical Officer			
				endment, Date Original onth/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)	Table	e I - Noi	n-D	erivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			Code (Instr. 3, 4 and 5) (Instr. 8) (A)					Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
C				Code	V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	12/07/2007			Р		2,200	А		2,200	D		
Common Stock	12/07/2007			Р		13,300	А	\$ 0.61	15,500	D		
Common Stock	12/07/2007			Р		4,500	А	\$ 0.62	20,000	D		
Common Stock	12/07/2007			Р		10,000	А	\$ 0.63	30,000	D		

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration	Title	or Number		
						Exercisable	Date	The	of		
				Cada V	(Λ) (D)						
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	s						
	Director	10% Owner	Officer	Other			
Tran Pierre V 15231 BARRANCA PKWY IRVINE, CA			Chief Medical Officer				
Signatures							
Maria S. Messinger, Attorney in fact	12/14/2007						
**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).

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.