Vanda Pharmaceuticals Inc.

Form 3

April 12, 2006

FORM 3

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

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person 2. Date of Event 3. Issuer Name and Ticker or Trading Symbol Requiring Statement Vanda Pharmaceuticals Inc. [VNDA] HOCKMEYER WAYNE T (Month/Day/Year) 04/12/2006 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) 1 MEDIMMUNE WAY (Check all applicable) (Street) 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Director 10% Owner _X_ Form filed by One Reporting Officer Other Person GAITHERSBURG, MDÂ 20878 (give title below) (specify below) Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities 4. Nature of Indirect Beneficial 1. Title of Security Beneficially Owned Ownership (Instr. 4) Ownership (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) 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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	Ownership	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date		Amount or Number of Shares	Derivative Security: Security Direct (D) or Indirect (I) (Instr. 5)		

Sieries B Preferred Stock \hat{A} $\stackrel{(1)}{=}$ \hat{A} $\stackrel{(2)}{=}$ \hat{A} $\stackrel{(2)}{=}$ \hat{A} $\stackrel{(3)}{=}$ \hat{A} $\stackrel{(3)}{=}$ \hat{A} $\stackrel{(3)}{=}$ \hat{A} $\stackrel{(4)}{=}$ \hat{A} $\stackrel{(4)}{=}$ \hat{A} $\stackrel{(5)}{=}$ $\stackrel{(5)}$

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Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

HOCKMEYER WAYNE T 1 MEDIMMUNE WAY Â X Â GAITHERSBURG, MDÂ 20878

Signatures

/s/ Wayne T. Hockmeyer 04/12/2006

**Signature of Reporting Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) Immediately.
- (2) Not Applicable.
- (3) Reflects the automatic conversion of each share of Series B Preferred Stock to one share of Common Stock to occur upon the close of business of the day immediately preceding the closing of the issuer's initial public offering.
- The reporting person is the President of MedImmune Ventures, Inc. The reporting person disclaims beneficial ownership of these securities and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose, except to the extent of his pecuniary interest therein, which the reporting person derives solely from his ownership of the stock of MedImmune, Inc., the parent company of MedImmune Ventures, Inc.
- (5) Reflects a 1-for-3.309755 reverse stock split to occur immediately following the effectiveness of the registration statement covering the issuer's initial public offering.

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.

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