Edgar Filing: FASSIHI REZA - Form 4/A

ΕΔSSIHIRF7Δ

| Form 4/A August 28, 20 | 006 | | | | | | | | | | |
|--|--|--------------|---|--|---------------|-------------------------------|--|--|-----------------|----------|--|
| FORM A | | | | | | | OMB AF | OMB APPROVAL | | | |
| UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549 | | | | | | COMMISSION | OMB Number: | 3235-0287 | | | |
| Check thi if no long subject to Section 10 Form 4 or | S CHANGES IN BENEFICIAL OWN SECURITIES | | | | | NERSHIP OF | Expires: January 3 200 Estimated average burden hours per response 0 | | | | |
| Form 5 obligatior may conti <i>See</i> Instru 1(b). | inue. Section 17 | (a) of the I | Public Ut | | ling Com | pany | Act of | e Act of 1934, E 1935 or Section O | n | | |
| (Print or Type R | Responses) | | | | | | | | | | |
| FASSIHI REZA Symbo | | | 2. Issuer Symbol | Issuer Name and Ticker or Trading 1bol | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | SCOLR Pharma, Inc. [DDD] | | | | | (Check all applicable) | | | |
| (Month/ | | | | e of Earliest Transaction h/Day/Year) 8/2006 | | | | XDirector10% Owner Officer (give title10% Other (specify below) below) | | | |
| | | | | endment, Date Original nth/Day/Year) 006 | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| DELLEVUE | 2, WA 98000 | | | | | | | Person | | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | erivative S | ecurit | ties Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | curity (Month/Day/Year) Execution Date, if | | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) | | | Securities Energicially Owned | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | | |
| Common | 08/08/2006 | | | Code V M | Amount 50,000 | or (D) | Price \$ | (Instr. 3 and 4) 50,067 (1) | D | | |
| Stock | 06/08/2000 | | | IVI | 50,000 | A | 1.05 | 50,007 <u>(4)</u> | 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)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transacti Code (Instr. 8) | 5. 6. Date ExercisabionNumber Expiration Date of (Month/Day/Year Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | | Date | 7. Title an Amount o Underlyin Securities (Instr. 3 ar | of Der ng Secu s (Ins | Price of ivative urity str. 5) | 9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr |
|---|---|---|---------------------------------------|---|---------------------------|--------------------|--|-----------------------------|---|---|
| | | | Code V | 4, and 5 (A) (I | 5) Date Exercisable | Expiration Date | of | nount umber ares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|---------|--------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| FASSIHI REZA 3625 132ND AVENUE SE BELLEVUE, WA 98006 | Х | | | | | | | |
| Signatures | | | | | | | | |
| Reza Fassihi by Daniel O. Wild Attorney-in-Fact | ds, | | 08/2 | 8/2006 | | | | |
| **Signature of Reporting Pe | rson | 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) Amended to correct amount of securities beneficially owned.

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.