## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

## Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

Name and Address of Reporting Person*  LEHMAN LEAH M					2. Issuer Name and Ticker or Trading Symbol BIOSANTE PHARMACEUTICALS INC									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
DETRIVIAN DEATH W						bpa ]									Director 10% Owner  Officer (give title Other (specify				
	Last) (First) (Middle) 11 BARCLAY BLVD UITE 280					3. Date of Earliest Transaction (Month/Day/Year) 04/15/2005									Vice President, Prod. Dev.				
Street) LINCOLNSHIRE IL 60069														Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person  Form filed by Mare then One Reporting					
(City)	City) (State) (Zip)													Form filed by More than One Reporting Person					
		Tab	le I - Non-Deri	vative	Sec	uritie	s Ac	quired,	Dis	posed o	f, or	Bene	ficial	lly Own	ed				
[				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Code (Instr.					d Secur Benef	cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(	(A) or (D)	Price	Trans	action(s) 3 and 4)		(111311.4)		
Common Stock				04/15/2005				S		377		D	\$4.0	2 8	80,000	D			
Common Stock				04/18/2005				S		200		D	\$3.7	4 7	79,800	D			
Common Stock				04/18/2005				S		6,300		D	\$3.7	5 7	'3,500	D			
Common Stock				04/18/2005				S		4,800		D	\$3.7	6 6	8,700	D			
Common Stock				04/18/2005				S		5,300		D	\$3.7	7 6	3,400	D			
Common Stock				04/18/2005				S		6,900		D	\$3.7	8 5	66,500	D			
Common Stock				04/18/2005				S		6,100		D	\$3.7	9 5	60,400	D			
Common Stock				04/18/2005						6,700		D	\$3.8	3 4	3,700	D			
Common Stock				04/18/2005						6,700		D	\$3.9	1 3	37,000	D			
Common Stock				04/19/2005						900		D	\$3.7	1 3	6,100	D			
Common Stock				04/19/2005						1,500		D	\$3.7	2 3	34,600	D			
Common Stock				04/19/2005						1,000		D	\$3.7	3 3	3,600	D			
Common Stock				04/19/2005						1,500		D	\$3.7	4 3	32,100	D			
Common Stock				04/19/2005						6,800		D	\$3.7	5 2	25,300	D			
Common Stock				04/19/2005						7,000		D	\$3.7	6 1	.8,300	D			
Common Stock				04/19/2005						7,800		D	\$3.7	7 1	.0,500	D			
Common Stock				04/19/2005						5,200		D	\$3.7	8	5,300	D			
Common Stock 04/19/					5			S		400		D	\$3.8	3	4,900	D			
Common Stock 04/19					9/2005					4,900		D	\$3.8	2	0	D			
		Ta	able II - Deriva (e.g., p							sed of, onvertib				Owned					
Title of Derivative Security Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa	Transaction Code (Instr.		of E		Date Exercisal Expiration Date Month/Day/Year		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Share	ber						

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.

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 Number.