FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:	3235-0104						
Estimated average burden							
hours per response:	0.5						

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

Goodwin Bradford S			2. Date of Event Requiring Staten Month/Day/Year 04/20/2006	nent	3. Issuer Name and Ticker or Trading Symbol PDL BIOPHARMA, INC. [PDLI]							
(Last) 34801 CAMP	(First) US DRIVE	(Middle)	-			ationship of Reporting Perso k all applicable) Director	on(s) to Issue		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) FREMONT	CA	94555				Officer (give title below)	Other (spe below)	cify	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 I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						unt of Securities ially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
Expiration			Expiration Da	Date Exercisable and xpiration Date Month/Day/Year)		3. Title and Amount of Securiti Underlying Derivative Security		4. Convers	cise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiratio Date	n Title	e	Amount or Number of Shares	Price of Derivative Security		Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

Remarks:

Immediately prior to the event requiring the filing of this statement, the reporting person did not beneficially own any securities of the issuer.

No securities are beneficially owned.

/s/ Bradford S. Goodwin 04/24/2006

** Signature of Reporting Person Dat

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

- * 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).

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.