FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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

| 1. Name and Address of Reporting Person* <u>KLEIN JOSEPH III</u> | | | | | | | 2. Issuer Name and Ticker or Trading Symbol PDL BIOPHARMA, INC. [PDLI] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|---|--|---|---------|----------------------------|--|--|-----|---|-----|--|------------------|----------------------------|--|--|--|---|--|---|--|--|
| | (Last) (First) (Middle) C/O PDL BIOPHARMA, INC. 34801 CAMPUS DRIVE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/28/2007 | | | | | | | | | Officer (give title Other (specify below) below) | | | | | |
| (Street) | (Street) FREMONT CA 94555 | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| | | Tab | le I - Nor | n-Deriv | ative | e Se | curities | Ac | quired, D | isp | osed o | f, or Be | neficia | ally (| Owned | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transar Date (Month/Date | | | | | | ar) | 2A. Deemed Execution Date, if any (Month/Day/Year | | Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | 4 and Securitie Benefici Owned I | | s illy ollowing | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | , | Amount | nount (A) or (D) | | , | Reported Transact (Instr. 3 a | ion(s) | | | Instr. 4) | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, T | ransaction code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisal Expiration Date (Month/Day/Year | | of Securities | | ties ng e Security | De | Price of erivative ecurity 1str. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4) | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | piration te | Title | Amount or Number of Shares | r | | | | | | | |
| Stock Option (Right to Buy) | \$23.81 | 07/28/2007 | | | A | | 15,000 | | (1) | 07/ | /28/2014 | Common Stock | 15,00 | 0 | \$0 | 15,000 | 0 | D | | | |
| Stock Option (Right to Buy) | \$23.73 | 07/30/2007 | | | A | | 25,000 | | (1) | 07/ | /30/2014 | Common Stock | 25,00 | 0 | \$0 | 25,000 | 0 | D | | | |

Explanation of Responses:

1. This option vests monthly with respects to 1/24 of the shares subject to the option beginning August 28, 2007. Only vested options are exercisable.

Remarks:

/s/ Joseph Klein III

07/31/2007

** Signature of Reporting Person

Date

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 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.