#### PROTEIN DESIGN LABS INC/DE

Form 4/A

February 28, 2005

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average

burden hours per

**OMB APPROVAL** 

if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

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 may continue. 30(h) of the Investment Company Act of 1940

response...

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to

Issuer

below)

LINK MAX

Symbol

PROTEIN DESIGN LABS INC/DE

(Check all applicable)

[PDLI]

(Month/Day/Year)

06/30/2004

(Last)

3. Date of Earliest Transaction

X\_ Director Officer (give title

10% Owner Other (specify

C/O PROTEIN DESIGN LABS. INC., 34801 CAMPUS DRIVE

(First)

(Street)

(Middle)

4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year)

Applicable Line)

\_X\_ Form filed by One Reporting Person 06/30/2004 Form filed by More than One Reporting

FREMONT, CA 94555

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if (Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following Reported

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I) (Instr. 4) (Instr. 4)

(A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price

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.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Conversion 3. Transaction Date 3A. Deemed

5. Number

6. Date Exercisable and (Month/Day/Year) Execution Date, if Transaction of Derivative Expiration Date

7. Title and Amount of 8. l Underlying Securities

### Edgar Filing: PROTEIN DESIGN LABS INC/DE - Form 4/A

Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		S
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy) (1)	\$ 19.13	06/30/2004		A	3,000		(2)	06/30/2014	Common Stock	3,000	

(In

# **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

LINK MAX C/O PROTEIN DESIGN LABS, INC. 34801 CAMPUS DRIVE FREMONT, CA 94555



# **Signatures**

/s/ Max Link 02/28/2005

\*\*Signature of Person 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).
- This entry on this amended Form 4 is not a new transaction but is included only to gain access to the system. On the original Form 4 filed on June 30, 2004, four stock option grants were reported: (1) 6/30/2004 transaction date for 3,000 shares, (2) 6/30/2004 transaction date for 3,000 shares, (3) 6/30/2004 transaction date for 12,000 shares, and (4) 6/30/2004 transaction date for 3,000 shares. The 4th grant of an option for 3,000 shares was reported in error and is hereby deleted.
- (2) Options vest 1/12 per month over one (1) year from the date of the grant. Only vested shares are exercisable.

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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