FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 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

1. Name and Address of Reporting Person* Siegel Jordan I						2. Issuer Name and Ticker or Trading Symbol NABI BIOPHARMACEUTICALS [NABI]								tionship of Reporting Person(s) to Issuer .all applicable) Director 10% Owner Officer (give title Other (specify			
	I BIOPHA	(First) (Middle) PHARMACEUTICALS			3. Date of Earliest Transaction (Month/Day/Year) 03/10/2008								X	below) below) Sr. VP Fin. & Admin, CFO Treas			, , ,
12276 WILKINS AVENUE														ndividual or Joint/Group Filing (Check Applicable			
(Street) ROCKVILLE MD 20852				Lii								Line)	, ,				
(City)	City) (State) (Zip)												Form filed by More than One Reporting Person				
(City)	(31	-		Doriva	tivo S	ocuriti	oc Ao	wirod	Dic	nosod o	f or Br	nofi	oially	Οννηο	d		
1. Title of S	ecurity (Inst			Transacti		re Securities Acquired, Disposed of, or Benefi							-	5. Amo		6. Ownership	7. Nature
, , , , , , , , , , , , , , , , , , ,				Date (Month/Day/Year)		Execution Date, if any (Month/Day/Year)	Transaction Code (Instr. 8)		Disposed Of (D) (Instr. 3, 4			and 5)	Benefic Owned	Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Pri	ce	Transa	ed ction(s) 3 and 4)		(Instr. 4)
Common	Stock		(03/10/2	800			S		32,896	D	\$	3.25	52,7	61.1864	D	
Common	Stock		(03/10/2	800			S		700	D	\$3	3.255	52,0	61.1864	D	
Common Stock				03/10/2008				S		100	D	\$3	3.257	51,9	61.1864	D	
Common Stock			(03/10/2008				S		200	D	\$3	.2575	51,7	61.1864	D	
Common	Stock		(03/10/2	800			S		19,012	D	\$	3.26	32,7	49.1864	D	
Common	Stock		(03/10/2	800			S		100	D	\$3	3.265	32,6	49.1864	D	
Common	Stock		(03/10/2	800			S		5,095	D	\$	3.27	27,5	54.1864	D	
Common	Stock		(03/10/2	800			S		100	D	\$3	3.275	27,4	54.1864	D	
Common Stock			(03/10/2008				S		1,000	D	\$	3.28	26,4	54.1864	D	
Common Stock			(03/10/2008				S		800	D	\$	3.29	25,6	54.1864	D	
Common Stock			(03/10/2008				S		200	200 D \$3.		3.295	25,454.1864		D	
Common Stock			(03/10/2008				S		100	D	\$3	\$3.297		54.1864	D	
Common Stock			(03/10/2008				S		4,800 D \$3		3.3	20,554.1864		D		
Common Stock			(03/10/2008				S	s 100 D		\$	3.31	20,454.1864		D		
Common Stock			(03/10/2008				S		100	D \$3.3		3.325	20,354.1864		D	
Common Stock			(03/10/2008				S		1,100	D	\$	3.33	19,254.1864		D	
Common Stock 03/10				03/10/2	800			S		100 Γ		\$	3.34	19,154.1864		D	
Common Stock 03/10/2				03/10/2	800			S		100	D	\$	3.35	19,054.1864		D	
Common Stock 03/10/2				800			S		897	D	\$	\$3.5		57.1864	D		
		Ta	able II - De e.e.							sed of, o				vned			
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution or Exercise (Month/Day/Year) if any		3A. Deemed Execution Da if any (Month/Day/\	n Date, Trans		ion of		6. Date Exercis Expiration Dat (Month/Day/Ye		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deriv Secu (Instr	vative (urity :	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)
Synlanation				C	ode V	(A)	(D)	Date Exercisa		Expiration Date	1	or Numbe of Shares	r				

Remarks:

attorney-in-fact

** 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.