

SANCHEZ OSCAR J
Form 5
April 11, 2007

FORM 5

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).
Form 3 Holdings
Reported
Form 4
Transactions
Reported

**ANNUAL STATEMENT OF CHANGES IN BENEFICIAL
OWNERSHIP OF SECURITIES**

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
30(h) of the Investment Company Act of 1940

OMB APPROVAL

OMB
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1. Name and Address of Reporting Person *
SANCHEZ OSCAR J

2. Issuer Name **and** Ticker or Trading
Symbol
CHAD THERAPEUTICS INC
[CTU]

5. Relationship of Reporting Person(s) to
Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Statement of Issuer's Fiscal Year Ended
(Month/Day/Year)
03/31/2007

____ Director ____ 10% Owner
____X____ Officer (give title ____ Other (specify
below) below)
VP Business Development

21622 PLUMMER ST

(Street)

4. If Amendment, Date Original
Filed(Month/Day/Year)

6. Individual or Joint/Group Reporting

(check applicable line)

CHATSWORTH, CA 91311

____X____ Form Filed by One Reporting Person
____ Form Filed by More than One Reporting
Person

(City) (State) (Zip)

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Amount	(A) or (D)	Price			
Common Shares	04/30/2006	04/30/2006	I	434	A	\$ 3.02	113,910	I	Retirement Plan
Common Shares	05/31/2006	05/31/2006	I	480	A	\$ 2.73	113,910	I	Retirement Plan
Common Shares	06/30/2006	06/30/2006	I	468	A	\$ 2.8	113,910	I	Retirement Plan
Common Shares	07/31/2006	07/31/2006	I	495	A	\$ 2.65	113,910	I	Retirement Plan

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Common Shares	08/31/2006	08/31/2006	I	755	A	\$ 1.74	113,910	I	Retirement Plan
Common Shares	09/30/2006	09/30/2006	I	640	A	\$ 2.05	113,910	I	Retirement Plan
Common Shares	10/31/2006	10/31/2006	I	558	A	\$ 2.35	113,910	I	Retirement Plan
Common Shares	11/30/2006	11/30/2006	I	567	A	\$ 2.31	113,910	I	Retirement Plan
Common Shares	12/31/2006	12/31/2006	I	590	A	\$ 2.22	113,910	I	Retirement Plan
Common Shares	01/31/2007	01/31/2007	I	576	A	\$ 2.32	113,910	I	Retirement Plan
Common Shares	02/28/2007	02/28/2007	I	687	A	\$ 1.91	113,910	I	Retirement Plan
Common Shares	03/31/2007	03/31/2007	I	791	A	\$ 1.66	113,910	I	Retirement Plan

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

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(9-02)

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 Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. of D Se B O E Is Fi (I
					(A) (D)	Date Exercisable Expiration Date	Title Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
SANCHEZ OSCAR J 21622 PLUMMER ST CHATSWORTH, CA 91311	Â	Â	Â VP Business Development	Â

Signatures

/s/ Oscar
Sanchez

04/11/2007

__Signature of
Reporting 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).

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.