FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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* Prelack Steven						2. Issuer Name and Ticker or Trading Symbol PRO PHARMACEUTICALS INC [PRW]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) C/O PRO-PHARMACEUTICALS, INC. 7 WELLS AVENUE, SUITE 34.					3. Date of Earliest Transaction (Month/Day/Year) 02/08/2009								Office below	(give title		Other (s below)	pecify	
(Street) NEWTON MA 02459 (City) (State) (Zip)				4	4. If Amendment, Date of Original Filed (Month/Day/Year)								e) X Form Form	′				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transac Date				. Transactio	ction 2A. Deemed Execution Date			3. Transac Code (I ar)	ction	4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		ed (A) or str. 3, 4 and	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership 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 Da if any (Month/Day/Y	Code	saction (Instr.			6. Date Exercisable Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	· v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amount or Number of Shares						
Stock Option (right to buy)	\$0.12	02/08/2009		A			4,000	02/08/2009	02	2/08/2014	Common Stock	4,000	\$0	4,000		D		

Explanation of Responses:

/s/ Maureen Foley

02/11/2009

** Signature of Reporting Person

Date

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

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.

^{*} 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).