FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washing

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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pton, D.C. 20549	OMB APPROVA
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	3235-0287
Estimated average burden	

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 Number:	3235-0287					
Estimated average burden						
hours per response:	0.5					

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Name and Address of Reporting Person* ZUCCONI THEODORE DANIEL						2. Issuer Name and Ticker or Trading Symbol PRO PHARMACEUTICALS INC [PRWP.OB								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last)	(F	First)										X	X Officer (give title Other (specify below) Chief Executive Officer							
C/O PRO-PHARMACEUTICALS, INC 7 WELLS AVENUE, SUITE 34					3. Date of Earliest Transaction (Month/Day/Year) 04/21/2009									Cn:	ief Exec	utive	Officer			
(Street) NEWTO)N M	ſА	02459		4. If Amendment, Date of Original Filed (Month/Day/Year)						- 1	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(\$	State)	(Zip)											To state mice by whole that one repoliting reason						
		7	able I - Nor	-Deriv	ative S	Securitie	s Ac	cquired, [Disp	osed c	of, or E	Bene	ficially	Owned						
Date					2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.				(A) or 3, 4 and 5)	5. Amount Securities Beneficiall Owned Fol	у	Form:	Direct Indirect It. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount (A) or (D)			Price	Reported Transactio (Instr. 3 an				Instr. 4)		
			Table II - I					uired, Di s, options						wned						
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/Ye	Code	nsaction Derivative Ex			6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amou Securities Underl Derivative Securities (Instr. 3 and 4)			derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	re es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)				
				Code	v v	(A)	(D)	Date Exercisable		opiration ate	Title	N	mount or umber of nares		Transact (Instr. 4)					
Employee Stock Option (right to buy)	\$47.5	05/21/2009		A		400,000		05/21/2009	05	5/21/2016	Commo Stock	n Z	100,000	\$0	400,0	000	D			
Employee Stock Option (right to buy)	\$47.5	05/21/2009		A		150,000		12/31/2009	05	5/21/2016	Commo Stock	ⁿ 1	150,000	\$0	150,0	000	D			
Employee Stock Option (right to buy)	\$47.5	05/21/2009		A		200,000		12/31/2010	05	5/21/2016	Commo Stock	n 2	200,000	\$0	200,0	000	D			
Employee Stock Option (right to	\$47.5	05/21/2009		A		1,250,000		(1)	05	5/21/2016	Commo Stock		,250,000	\$0	1,250,	000	D			

Explanation of Responses:

1. Balance of 1,250,000 employee stock options will vest upon completion of certain milestone objectives identified in Zucconi Employment Agreement effective May 21, 2009.

05/28/2009 /s/ Maureen Foley

** 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.