FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL

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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* TRABER PETER G					PF	2. Issuer Name and Ticker or Trading Symbol PRO PHARMACEUTICALS INC PWRP.OB										all app			ner		
(Last)	(Fi	rst) (Middle)		3 [2 Date of Fadicat Transaction (Month/Dec/Mass)										Offic belov	er (give title w)		ner (sp ow)	pecify	
C/O PRO-PHARMACEUTICALS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 02/13/2009															
7 WELLS AVENUE, SUITE 34					1 If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable					
(Street)					4. II Amendment, Date of Original Filed (Month/Day/Year)											Line)					
l ` ′	NEWTON MA 02459														X	, , ,					
					-											Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ur) E	2A. Deemed Execution Date, f any (Month/Day/Year)		Code (Transaction Dispos Code (Instr. 5)			ities Acquired (A) d Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	t of ct Bo	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount		(A) or (D)	Pric	е	Transaction(s) (Instr. 3 and 4)			"	1150. 4)	
Common Stock					02/13/2009						500,000	0(1)	A	A \$0		500,000		D			
	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 (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month.								ative rities ired sed	6. Date E Expiratio (Month/E	on Dat		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				vative urity ir. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	nip of B O ct (li	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisa		Expiration Date	Title	Amo or Nun of Sha	ber							

Explanation of Responses:

1. Restricted stock grant, which is subject to forfeiture if Mr. Traber no longer serves as a director of the Issuer as follows: (i) 100%, if he is no longer serving as a director before February 13, 2010; (ii) 50%, if he is serving as a director on or after February 13, 2010 but no longer serving before May 13, 2010; (iii) 37.5%, if he is serving as a director on or after May 13, 2010 but no longer serving before August 13, 2010; (iv) 25%, if he is serving as a director on or after August 13, 2010 but no longer serving before November 13, 2010; and (v) 12.5%, if he is serving as a director on or after November 13, 2010 but no longer serving before February 13, 2011.

Remarks:

Exhibit 24 - Power of Attorney, dated February 11, 2009 by Peter G. Traber (incorporated by reference to Exhibit 24 to Form 3 filed by Peter G. Traber on February 19, 2009, with respect to the Issuer).

/s/ Maureen E. Foley, Attorney-in-Fact 02/19/2009

** 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.