FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB AF	PPROVAL
OMB Number:	3235-028

37 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	ON CAF	PE	PEREGRINE PHARMACEUTICALS INC [PPHM]										heck all a			10% O Other (wner			
(Last) (First) (Middle) C/O PEREGRINE PHARMACEUTICALS, INC. 14282 FRANKLIN AVE.						3. Date of Earliest Transaction (Month/Day/Year) 08/31/2007											ow)		below)	
(Street) TUSTIN (City)	USTIN CA 92780 City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - No	n-Deriv	ative	Se	curiti	es A	cqu	ired, I	Disp	osed	of, or	Ben	eficia	lly Owr	ed			
Date				2. Trans Date (Month/I		ar) l	2A. Deemed Execution Date if any (Month/Day/Yea			3. Transac Code (II 8)		Dispose	rities Acquired (A) ed Of (D) (Instr. 3, 4			d Secu Bene Own	ount of rities ficially ed Followin	Fo (D)	Ownership rm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership
							Code	v	Amount	t	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock, \$.001 par value 08/31					L/2007)7				P		6,83	6,831 A \$		\$0.7	71	38,293		D	
		Т	able II -	Derivat (e.g., p												y Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)				Exp	Date Exe Diration I Donth/Day	Date		7. Title and Amount of Securities Underlying Derivative (Instr. 3 an			8. Price of Derivative Security (Instr. 5)	derivat Securi Benefi Owned Follow Report	tive ties cially I ing ted action(s)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				-	Code	v	(A)	(D)	Dat Exe	e ercisable		piration ate	Title	0 N	Amount or Number of Shares					
Non- Qualified Stock Option (right to buy)	(1)									(1)		(1)	Comn		(1)		1,05	60,000	D	

Explanation of Responses:

1. Not applicable

Remarks:

/s/ Paul J. Lytle, Power of

Attorney for Carlton M.

<u>Johnson</u>

** Signature of Reporting Person

Date

08/31/2007

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.