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FORM 4

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).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

| 934 | hours per response: | 0.5 |
|-----|---|-----|
| | | |
| С | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | |

| 1. Name and Address of Reporting Person [*] SWARTZ ERIC S | | | PEREGRINE PHARMACEUTICALS INC | | ationship of Reporting Pe (all applicable) | erson(s) to issuer |
|---|---|--|--|------------------------|---|--------------------------|
| | | | [PPHM] | X | Director | 10% Owner |
| | ast) (First) (Middle) /O PEREGRINE PHARMACEUTICALS, INC. 4272 FRANKLIN AVE, SUITE 100 | | 3. Date of Earliest Transaction (Month/Day/Year) 03/08/2006 | - | Officer (give title below) | Other (specify below) |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | vidual or Joint/Group Filin Form filed by One Re | |
| TUSTIN, CA CA 92780 | | | - | | Form filed by More the Person | an One Reporting |

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 | 3. Transa Code (| | | | 5. Amount of Securities Beneficially | 6. Ownership Form: Direct (D) or Indirect | 7. Nature of Indirect Beneficial |
|---------------------------------|--|---|------------------------|-------------|---|--------|---|---|--|
| | (| (Month/Day/Year) | | , (0) or | | Price | Owned Following Reported Transaction(s) (Instr. 3 and 4) | (I) (Instr. 4) | Ownership (Instr. 4) |
| Common Stock, \$.001 par value | 03/08/2006 | | Р | 10,000 | A | \$1.24 | 1,989,212 | D ⁽¹⁾ | |
| Common Stock, \$.001 par value | | | | | | | 538,693 | I | By Swartz Ventures, Inc. |

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. Transa Code (8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Non- Qualified Stock Option (right to buy) | (2) | | | | | | | (2) | (2) | Common Stock | 700,000 | | 700,000 | D | |

Explanation of Responses:

1. Includes 62,500 shares held in an Individual Retirement Account (IRA) for the benefit of Eric S. Swartz.

2. Not applicable. **Remarks:**

Remains.

/s/ Paul Lytle, Power of

Attorney for Eric S.

03/09/2006

Date

** Signature of Reporting Person

Swartz

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.