FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

Check this box if no longer subject to	STATEMENT OF CH
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Se

## **IANGES IN BENEFICIAL OWNERSHIP**

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person*     LYTLE PAUL J				PE	2. Issuer Name and Ticker or Trading Symbol PEREGRINE PHARMACEUTICALS INC [ PPHM ]										ationship of Reporting Pe k all applicable) Director Officer (give title			10% Ow Other (s	ner		
	(Last) (First) (Middle) C/O PEREGRINE PHARMACEUTICALS, INC. 14282 FRANKLIN AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 08/20/2007										X Officer (give title Other (specify below)  Chief Financial Officer					
(Street) TUSTIN (City)						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indi Line)	Form f	al or Joint/Group Filing (Check Applicable form filed by One Reporting Person form filed by More than One Reporting ferson				
		Tak	le I - No	n-Deri	vativ	e Se	curiti	ies A	cqı	uired,	Dis	posed	of, or Be	nefic	ially	Owned					
Date				saction /Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		∍,	Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4				es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Ī	Code	v	Amount	(A) or (D)	Pric	:e	Reported Transaction(s) (Instr. 3 and 4)		D		(Instr. 4)		
Common Stock, \$0.001 par value			08/2	0/2007	7				P		16,68	35 A	\$0.58	5888							
			Table II -										f, or Bene tible secu			wned					
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,		Transaction Code (Instr.		n of		Pate Exer partion I ponth/Day	Date		of Securities		[	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e ercisable		epiration	Title	Amo or Num of Shar	ber						
Incentive Stock Option (right to	(1)									(1)		(1)	Not Applicable.	(1)	)		720,83	3	D		

**Explanation of Responses:** 

1. Not Applicable.

Remarks:

/s/ Paul J. Lytle

08/20/2007

\*\* 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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).