FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

gton, D.C. 20549	OMB APPRO

washington, D.C. 20049	OMB APPR	OVA
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	323

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

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

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* JOHNSON CARLTON M				<u> </u>	2. Issuer Name and Ticker or Trading Symbol PEREGRINE PHARMACEUTICALS INC								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) 14282 FI	(F RANKLIN .	irst) AVENUE	(Middle)	3	PPHM] 3. Date of Earliest Transaction (Month/Day/Year) 05/02/2011								(give title		Other (s			
(Street) TUSTIN (City)	<u></u>	A tate)	92780 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	e) X Form fil Form fil	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(3		ıble I - Non-	 Derivati	ve Se	ecuritie	s Ac	auired. Di	spose	ed o	f. or Ber	neficiall	v Owned					
1. Title of Security (Instr. 3) 2. T			. Transacti	Saction 2A. Deemed Execution Date		ed n Date	e, Transaction Code (Instr. 4. Securities Disposed Of		ies Acquire	d (A) or	5. Amoun Securities Beneficia Owned Fo	Form (D) or		n: Direct I or Indirect E nstr. 4)	7. Nature of Indirect Beneficial Ownership			
						Code V	Amo	Amount (A) or (D)		Price	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)			
			Table II - De					uired, Dis s, options,					Owned					
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, Transacturity or Exercise (Month/Day/Year) if any Code (In								d	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	e s illy g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expira Date	tion	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)	ion(s)	,		
Non- Qualified Stock Options (right to buy)	\$2.44	05/02/2011		A		142,000		06/02/2011 ⁽¹⁾	05/12/2	2021	Common Stock	142,000	\$0	512,00	00	D		

Explanation of Responses:

1. This option vests monthly over a three year period.

Remarks:

/s/ Carlton M. Johnson

05/03/2011

** 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.