FORM 4

obligations may continue. See Instruction 1(b).

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	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
Section 10. Form 4 or Form 5		

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

1. Name and Address of Reporting Person* Fussey Shelley PM (Last) (First) (Middle) 14282 FRANKLIN AVE.					2. Issuer Name and Ticker or Trading Symbol PEREGRINE PHARMACEUTICALS INC [PPHM] 3. Date of Earliest Transaction (Month/Day/Year) 04/30/2012									theck all	iship of Reportion applicable) irector ifficer (give title elow) V.P., Intelle		10% C Other below)	wner (specify	
(Street) TUSTIN (City)	C.A	A 9	92780-701 Zip)	17				Date o	of Original	Filed	led (Month/Day/Year)				ne) X F F	ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			on
		Tabl	e I - Non	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	eficia	ally Ov	/ned			
Dat			Date	Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securit Disposed 5)					nd Se Be Ov	Amount of curities neficially red Following ported	For (D)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A (I	A) or D)	Price	Tra	nsaction(s) str. 3 and 4)			(Instr. 4)
Common	Stock			04/30	/2012	2			J ⁽¹⁾		12,49	8	Α	\$ <mark>0</mark>	.4	37,019	,019 D		
		Та	able II - D								sed of, onvertib				y Own	ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, ay/Year)	4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instrand 5	ative rities ired sed	6. Date E: Expiratio (Month/D	n Date	•	7. Title	int of rities rlying ative rity (Ins	ount nber	8. Price Derivati Security (Instr. 5	derivative Securities	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

1. Shares acquired under the Peregrine employee stock purchase plan on April 30, 2012.

/s/ Michelle May For Shelley P.M. Fussey

05/01/2012

** 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.