#### **ZUCCONI THEODORE DANIEL**

Form 4

December 21, 2007

<b>FORM</b>	4	UNITED STA

### TES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB** 

Estimated average

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

3235-0287 Number: January 31, Expires:

2005

**OMB APPROVAL** 

Section 16. Form 4 or Form 5 obligations

may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 See Instruction

burden hours per response... 0.5

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \* **ZUCCONI THEODORE DANIEL** 

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

PRO PHARMACEUTICALS INC [PRW]

(Check all applicable)

President

(Middle)

3. Date of Earliest Transaction (Month/Day/Year) 12/21/2007

\_X\_\_ Director 10% Owner Other (specify \_X\_\_ Officer (give title below) below)

C/O PRO-PHARMACEUTICALS. INC, 7 WELLS AVENUE, SUITE

(Street)

(First)

34

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

3.

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

**NEWTON, MA 02459** 

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

TransactionAcquired (A) or Disposed of (D) Code (Instr. 8) (Instr. 3, 4 and 5)

4. Securities

5. Amount of Securities Beneficially (D) or Owned Following (Instr. 4) Reported

6. Ownership 7. Nature of Form: Direct Indirect Beneficial Indirect (I) Ownership (Instr. 4)

(A)

Transaction(s)

(Instr. 3 and 4) Price Amount (D)

Common Stock

12/11/2007

32 G D

\$0 64,343 (1)

D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

(Month/Day/Year)

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

### Edgar Filing: ZUCCONI THEODORE DANIEL - Form 4

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. Transaction Code (Instr. 8)	5. Number of orDerivative Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Pate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D	Date Exercisable	Expiration Date	Title	Amount Number Shares
Employee Stock Options	\$ 0.7	12/19/2007		A	200,000	<u>(1)</u>	12/19/2012	Common Stock	200,00

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner Officer		Other		
ZUCCONI THEODORE DANIEL C/O PRO-PHARMACEUTICALS, INC 7 WELLS AVENUE, SUITE 34 NEWTON, MA 02459	X		President			

## **Signatures**

/s/ Maureen Foley-Attorney-in-fact 12/21/2007

\*\*Signature of Reporting Person Date 
Description

## **Explanation of Responses:**

- \* 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).
- Includes 3,998 shares held in retirement accounts of the wife of the reporting person and the reposting person disclaims benefical ownership of such shares to the extent of any pecuniary interest therein, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such shares for the purposes of Section 16 or otherwise.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2