### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

#### OMB APPROVAL

OMB Number: 3235-0104 Expires: January 31, 2005 Estimated average burden hours per response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Greenberg Arthur			<ul><li>2. Date of Event Requiring</li><li>Statement</li><li>(Month/Day/Year)</li></ul>		3. Issuer Name and Ticker or Trading Symbol PRO PHARMACEUTICALS INC [PWRP.OB]					
(Last)	(First)	(Middle)	08/24/2009	)	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
C/O PRO-PHARMACEUTICALS, INC., 7 WELLS AVENUE, SUITE 34 (Street) NEWTON, MA 02459						(Check all applicable) <u>X</u> Director 10% Owner Officer Other (give title below) (specify below)		<ul> <li>6. Individual or Joint/Group</li> <li>Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting</li> <li>Person</li> <li> Form filed by More than One</li> </ul>		
(City)	(State)	(Zip)		Table I - N	Jon-Derivat	ive Securiti	es Bei	Reporting Person neficially Owned		
1.Title of Secur (Instr. 4)	ty			2. Amount of Beneficially (Instr. 4)	f Securities	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ure of Indirect Beneficial rship		
No derivative	e securities	beneficial	ly owned.	0		D	Â			
Reminder: Repo owned directly o	or indirectly. Person inform	ns who resp ation conta	oond to the c ined in this	collection of form are not	- 5	EC 1473 (7-02	)			
required to respond unless the form displays a currently valid OMB control number.										
Т	able II - Deri	vative Secur	ities Beneficia	ally Owned (e.	g., puts, calls,	warrants, opt	tions, c	onvertible securities)		

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)

### Edgar Filing: Greenberg Arthur - Form 3

		(Instr. 4)		Price of	Derivative
Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Greenberg Arthur C/O PRO-PHARMACEUTICALS, INC. 7 WELLS AVENUE, SUITE 34 NEWTON, MA 02459	ÂX	Â	Â	Â		
Signatures						
/s/ Maureen Foley as Attorney-in-Fact for Arthur Greenberg			08/25/2009			
**Signature of Reporting Person			Date			
Explanation of Responses:						

# **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 5(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).

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### **Remarks:**

Exhibit 24: Power of Attorney, dated February 10, 2009 by Arthur R. Greenberg

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.