FORM 4	
Check this box if no	

(Print or Type Responses)

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

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

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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See
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 POTTER MATTHEW B	2. Issuer Name and Ticker or Trading Symbol PRESSURE BIOSCIENCES INC [PBIO]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) 135 ROCKY KNOLL DRIVE		3. Date of Earliest Transaction (Month/Day/Year) 03/12/2009						X_Officer (give title below) Other (specify below) Vice President of Sales			
(Street) STOUGHTON, MA US 02072		4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date2A. Deemed Execution Date, if (Month/Day/Year)3. Transaction Code4. Securities Acquire (A) or Disposed of (I (Instr. 8)(Instr. 3, 4 and 5)		f (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Beneficial					
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	

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

Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numb	er	6. Date Exercisa	ble and	7. Title and	I	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	of		Expiration Date		Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Derivativ	ve	(Month/Day/Yea	ur)	Underlying	;	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Securitie						(Instr. 5)	-	Derivative	Ownership
	Derivative					Acquired	t			(Instr. 3 an	d 4)				(Instr. 4)
	Security					(A) or							0	Direct (D)	
						Dispose	d of						1	or Indirect	
						(D)							Transaction(s)	· · /	
						(Instr. 3,	4,						(Instr. 4)	(Instr. 4)	
						and 5)			1						
											Amount				
								Date	Expiration	T 1'4	or				
								Exercisable	Date	Title	Number				
				Code	v	(A)					of Shares				
				Code	v	(A)	(D)				Shares				
Incentive	:									Common					
Stock	\$ 0.77	03/12/2009		Α		35,000		03/12/2009(1)	03/12/2019	Stock	35,000	\$ 0	35,000	D	
Option										STOCK					

Reporting Owners

Demention	Dense dina Orana Nama (Addama		Relationships							
Reporting Owner Name / Address		Director	10% Owner	Officer	Other					
135 ROO	R MATTHEW B CKY KNOLL DRIVE HTON, MA US 02072			Vice President of Sales						

Signatures

Richard T. Schumacher, Attorney-in-fact	03/16/2009
***Signature of Reporting Person	Date

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).

(1) 1/3 of options vest immediately while 2/3 of options will vest ratably over two years.

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.