FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APP             | ROVAL     |
|---------------------|-----------|
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting F     SAVAS PETER G   | Date of Event<br>equiring Staten<br>Month/Day/Year<br>7/09/2008 |  | 3. Issuer Name and Ticker or Trading Symbol pSivida Corp. [ PSDV ] |   |  |  |                                    |   |            |  |
|---|---|--|--|---|--|--|------------------------------------|---|------------|--|
| (Last) (First) C/O PSIVIDA CORP.  | (Middle)  |  |  | Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner |  |  | (1                                 | 5. If Amendment, Date of Original Filed (Month/Day/Year)  |            |  |
| 400 PLEASANT STREET   |   |  |  | Officer (give title below)  |  | Other (spe<br>below)                   |                                    | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person |            |  |
| (Street) WATERTOWN MA 02472   |   |  |  |   |  |  |                                    | Form filed by More than One<br>Reporting Person   |            |  |
| (City) (State)  | (Zip)   |  |  |   |  |  |                                    |   |            |  |
| Table I - Non-Derivative Securities Beneficially Owned  |   |  |  |   |  |  |                                    |   |            |  |
| 1. Title of Security (Instr. 4)   |   |  |  | 2. Amount of Securities<br>Beneficially Owned (Instr. 4)                                      |  |  |                                    | 4. Nature of Indirect Beneficial Ownership (Instr. 5)   |            |  |
| Table II - Derivative Securities Beneficially Owned<br>(e.g., puts, calls, warrants, options, convertible securities) |   |  |  |   |  |  |                                    |   |            |  |
| 1. Title of Derivative Security (Instr. 4)  |   | 2. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |  | d 3. Title and Amount of Securitie Underlying Derivative Security                             |  | ty (Instr. 4) Conve                    |                                    | se Form:  | (Instr. 5) |  |
|   |   | Date<br>Exercisable  | Expiration<br>Date   | n Title   |  | Amount<br>or<br>Number<br>of<br>Shares | Price of<br>Derivative<br>Security | Direct (D)<br>e or Indirect<br>(I) (Instr. 5)   |            |  |

**Explanation of Responses:** 

Remarks:

Exhibit 24 - Power of Attorney

No securities are beneficially owned.

/s/ Lori Freedman, Attorney-in-Fact 07/21/2008

\*\* 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 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).

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.

## POWER OF ATTORNEY

I hereby constitute and appoint Lori Freedman, signing singly, my true and lawful attorney-in-fact to:

- (1) execute for and on my behalf, in my capacity as a director of pSivida Corp. (the "Company"), Forms 3, 4 and 5 in accordance with Section 16(a) of the Securities Exchange Act of 1934 and the rules thereunder; and
- (2) do and perform any and all acts for and on my behalf that may be necessary or desirable to complete and execute any such Form 3, 4 or 5 and timely file such form with the United States Securities and Exchange Commission and any stock exchange or similar authority.

I hereby grant to such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary, or proper to be done in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as I might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that such attorney-in-fact, or such attorney-in-fact's substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted. I acknowledge that the attorney-in-fact, in serving in such capacity at my request, is not assuming, nor is the Company assuming, any of my responsibilities to comply with Section 16 of the Securities Exchange Act of 1934.

This Power of Attorney shall remain in full force and effect until I am no longer required to file Forms 3, 4 and 5 with respect to my holdings of and transactions in Company securities, unless I earlier revoke it in a signed writing delivered to the attorneys-in-fact.

IN WITNESS WHEREOF, I have caused this Power of Attorney to be executed as of this 18th day of July, 2008.

| /s/ Peter G Savas |
|-------------------|
| Signature         |
| Peter G Savas     |
| Print Name        |

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