FORM 4

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

Washington,	D.C.	20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person*  Lee Vivian S					<u>M</u>	2. Issuer Name and Ticker or Trading Symbol  MERRIMACK PHARMACEUTICALS  INC [ MACK ]									(Check all ap		tor 10% Owner		o Owner	
(Last)	(F	rst) (	Middle)		3.0	Date of Earliest Transaction (Month/Day/Year)								_		Officer (give title below)		Other below)	er (specify w)	
C/O MERRIMACK PHARMACEUTICALS, INC.				, INC.		12/23/2014														
ONE KENDALL SQUARE, SUITE B7201					_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) CAMBRIDGE MA 02139														X Form filed by One Reporting Person						
					-										Forn Pers		re than One R	eporting		
(City)	(S		Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transa Date (Month/L				Day/Year) if a		2A. Deemed Execution Date, f any Month/Day/Year)		Code	Transaction Code (Instr. 5		. Securities Acquired (A) isposed Of (D) (Instr. 3, 4)			nd	Securities Beneficially		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect		
						Code	v	Amount	(A (E	A) or D)	Price		Transaction(s) (Instr. 3 and 4)			(				
Common Stock 12/23					3/2014						20,000	O A \$		\$10	.23	23 20,000		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)	
			Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	or	ount nber ires								

**Explanation of Responses:** 

/s/ Jeffrey A. Munsie, attorney-12/23/2014 in-fact

\*\* Signature of Reporting Person

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.