FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-028									
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0.5

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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).

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* Stewart Edward J.					<u>M</u>	2. Issuer Name and Ticker or Trading Symbol MERRIMACK PHARMACEUTICALS INC [MACK]									eck all appli Directo Officer	cable) or (give title	g Pers	son(s) to Iss 10% Ow Other (s	/ner	
(Last) (First) (Middle) C/O MERRIMACK PHARMACEUTICALS, INC. ONE KENDALL SQUARE, SUITE B7201					3. Date of Earliest Transaction (Month/Day/Year) 11/17/2014										SVI	SVP & Pres, Healthcare Sol				
(Street) CAMBRIDGE MA 02139					_ 4. II _	If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(5		(Zip)																	
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D.					action	ction 2A. Deemed Execution Date,			3. Trans	action	4. Securi	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amou Securiti Benefici Owned	int of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct r Indirect estr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or F	Price		rted action(s) . 3 and 4)		1	Instr. 4)	
Common Stock				11/1	7/2014	1			М		4,000	0 1	A	\$1.71	1.71 25,385		D			
Common Stock 1:				11/1	7/2014	1			S ⁽¹⁾		4,000	4,000 D		\$8.44	2) 21	21,385		D		
Common Stock 11/18				8/2014	2014			M		1,000	0 1	A	\$1.71	. 22	22,385		D			
Common Stock 11/18/				8/2014	2014			S ⁽¹⁾		1,000 D)	\$9	21,385			D			
		T	able II -								osed of converti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemd Execution if any (Month/Da	Date,	4. Transactio Code (Inst 8)				6. Date Exercisa Expiration Date (Month/Day/Yea		:	7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly D	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nu of	nount mber ares						
Stock Option (right to buy)	\$1.71	11/17/2014			M			4,000	(3)	C	08/03/2015	Commo Stock	ⁿ 4,	,000	\$0	7,000		D		
Stock Option (right to	\$1.71	11/18/2014			M			1,000	(3)		08/03/2015	Commo Stock	n 1,	,000	\$0	6,000		D		

Explanation of Responses:

- 1. This transaction was effected pursuant to a Rule 10b5-1 trading plan.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$8.42 to \$8.45, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer or the Staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within such range.
- 3. This option is fully vested.

/s/ Jeffrey A. Munsie, attorney-11/18/2014 in-fact

** 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 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.