FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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* Nielsen Ulrik B.						2. Issuer Name and Ticker or Trading Symbol MERRIMACK PHARMACEUTICALS INC [MACK]								all applic	able) r	g Pers	ion(s) to Issu	ner
(Last) (First) (Middle) C/O MERRIMACK PHARMACEUTICALS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 05/13/2015									Officer below)	(give title		Other (s below)	pecify
ONE KENDALL SQUARE, SUITE B7201 (Street) CAMBRIDGE MA 02139					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
CAMBRIDGE MA 02139 (City) (State) (Zip)														Form filed by More than One Reporting Person				ting
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution if any	2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Dispose Code (Instr. 5)		ties Acquire d Of (D) (Ins		and Securitie Beneficia		es Form (D) (c) Following d tion(s)		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount	ınt (A) or (D)			Transact (Instr. 3 a				
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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Code (Ins				6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		Derivative Security				10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	de V	(A)	(D)	Date Exercisable		xpiration ate	Title	Amoun or Number of Shares						
Stock Option (right to buy)	\$11.88	05/13/2015		A		17,951		(1)	0	5/12/2025	Common Stock	17,95	1	\$0	17,95	1	D	

Explanation of Responses:

1. This option is fully vested.

/s/ Jeffrey A. Munsie, attorneyin-fact

05/15/2015

** 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.