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

1. Name and Address of Reporting Person* <u>Dineen John M.</u>						2. Issuer Name and Ticker or Trading Symbol  MERRIMACK PHARMACEUTICALS  INC [ MACK ]									5. Relationship of Reporting Person(s) to Issuer Check all applicable)  X Director 10% Owner				
(Last) (First) (Middle) C/O MERRIMACK PHARMACEUTICALS, INC. ONE KENDALL SQUARE, SUITE B7201					3. Date of Earliest Transaction (Month/Day/Year) 06/15/2015										officer below)	(give title		Other (s below)	pecity
			02139 (Zip)	_	Line														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execution Date			;,   T	Transaction Dispose Code (Instr. 5)			es Acquire Of (D) (Ins		nd Securitie Beneficia		es Formally (D) (Following (I) (I		: Direct   C Indirect   E str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							[	Code V	Amou	ount (A) or (D)		Price		Transact (Instr. 3 a	tion(s)			insu. 4)	
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/Yo	Co	ansactio de (Inst			Exp	6. Date Exercisable a Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivative Security		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Co	de V	(A)	(D)	Date Exe	e ercisable	Expiration Date		Title	Amount or Number of Shares						
Stock Option (right to buy)	\$10.92	06/15/2015		A	A	13,30	5		(1)	06/14/20	25	Common Stock	13,300	5	\$0	13,306	5	D	

## **Explanation of Responses:**

1. This option is fully vested.

/s/ Jeffrey A. Munsie, attorney-06/16/2015 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.