FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	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(h)						

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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

1. Name and Address of Reporting Person* <u>CROCKER GARY L</u>						2. Issuer Name and Ticker or Trading Symbol MERRIMACK PHARMACEUTICALS INC [MACK]									lationship ck all app Direc	,	ing Pe	()	Issuer Owner
(Last) (First) (Middle) C/O MERRIMACK PHARMACEUTICALS, INC. ONE BROADWAY 14TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 05/17/2022									Office below	,	Rema	below	(specify ()
(Street) CAMBR (City)			2142 Zip)	2	4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									dividual or Joint/Group Filing (Check Applicable b) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(0.0)				lon-Deriva	tive	Secui	rities A	can	ired	Die	enneed o	of or l	Renefic	الدند	v Own	ed			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Ye	ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		1 4 1 D	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			5. Amount of Securities Beneficially Owned Following		int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership	
									e V	A	mount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)
Common	Common Stock			05/17/2022				P			225	A	\$5.095	56 ⁽¹⁾ 118		3,037			See footnote ⁽²⁾
Common Stock				05/18/202	2			P			5,000	A	A \$5.0814 ⁽³⁾		123,037				See footnote ⁽²⁾
		Tal	ble I	I - Derivati (e.g., pu							osed of, converti				Owne	d			
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year)						saction e (Instr.	5. Numb of Derivativ Securitie Acquired (A) or Dispose of (D) (Instr. 3, and 5)	ve (les d	Expiration (Month/Dass			Amo Secu Unde Deriv	le and unt of irities erlying vative irity (Instr. 1 4)	De Se (In	Price of erivative ecurity estr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	Owners Form: Iy Direct (I or Indire (I) (Instr		Beneficial Ownership t (Instr. 4)
					Code	e V	(A) (D		Date Exercisa	able	Expiration Date	ı Title	Amount or Number of Shares						

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$5.09 to \$5.10, 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 the ranges set forth in this footnote (1) to this Form 4.
- 2. Shares held by Crocker Family Investments, LLC, over which Reporting Person is the Managing Member.
- 3. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$4.94 to \$5.10, 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 the ranges set forth in this footnote (3) to this Form 4.

Remarks:

Chairman, President, and Treasurer

/s/ Gary L. Crocker

05/19/2022 Date

** 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.