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	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
obligations may continue. See Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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*						2. Issuer Name and Ticker or Trading Symbol MERRIMACK PHARMACEUTICALS										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Mulroy Robert J.					INC [MACK]									X Director				10% C	wner		
(Last) (First) (Middle)					ino [mack]										Offic belov	er (give title w)		Other below)	(specify		
C/O MERRIMACK PHARMACEUTICALS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 05/05/2014									President and CEO						
ONE KENDALL SQUARE, SUITE B7201						05/05/2011															
(Chrosh)				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						
															Form filed by More than One Reporting Person						
(City)	(St	ate) (Zip)																		
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	r Ben	eficia	ally	Owne	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution			3. Transa Code (8)			ties Acquired (A) d Of (D) (Instr. 3, 4			4 and Sec Be Ow		ount of ties cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	,	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 05.				05/05	05/05/2014				P		5,000		A	\$6.31		946,069		I)		
	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)	erivative Conversion Date Execution D ecurity or Exercise (Month/Day/Year) if any			Date, Transaction			n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)					9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	m: ect (D) ndirect	Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisal		Expiration Date	Title	or Nur of	ount nber res							

Explanation of Responses:

/s/ Jeffrey A. Munsie, attorney- 05/07/2014 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.