

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

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>Peters Richard</u> _____ (Last) (First) (Middle) <u>C/O MERRIMACK PHARMACEUTICALS, INC.</u> <u>ONE KENDALL SQUARE, SUITE B7201</u> _____ (Street) <u>CAMBRIDGE MA 02139</u> _____ (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>MERRIMACK PHARMACEUTICALS INC [MACK]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>President and CEO</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>05/08/2019</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

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 Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	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)	
						Date Exercisable	Expiration Date						Title
Stock Option (right to buy)	\$10.74	05/08/2019		J ⁽¹⁾	25,000	(2)	02/14/2028	Common Stock	25,000	\$0.00	200,000	D	
Stock Option (right to buy)	\$4.15	05/08/2019		J ⁽³⁾	225,000	(4)	12/10/2028	Common Stock	225,000	\$0.00	0	D	

Explanation of Responses:

- An option to purchase 225,000 shares was originally granted to the Reporting Person on February 15, 2018. 25,000 shares underlying this option were rescinded on May 8, 2019.
- This option vested as to 1/12th of the total number of shares originally granted on 5/15/18 and an additional 1/12th of the total number of shares originally granted at the end of each successive three month period thereafter until 2/15/21.
- An option to purchase 225,000 shares was originally granted to the Reporting Person on December 11, 2018. This option was rescinded in full on May 8, 2019.
- The original vesting schedule for this option was 1/12th of the total number of shares granted on 3/11/19 and an additional 1/12th of the total number of shares granted at the end of each successive three month period thereafter until 12/11/21.

Remarks:

/s/ Brian J. Kickham, attorney-in-fact 05/10/2019

** 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.