### Edgar Filing: MERRIMACK PHARMACEUTICALS INC - Form 4

#### MERRIMACK PHARMACEUTICALS INC

Form 4

December 23, 2014

| FORM  | 14   |   |  |                         | OMB APPROVAL   |  |                     |  |  |  |  |  |
|---|--|---|--|-------------------------|--|--|---------------------|--|--|--|--|--|
| . •   | - UNITED STA   |   | S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549            |                         |  |  | 3235-0287           |  |  |  |  |  |
| Check the if no lon                             | ger  | S   | •  |                         | EDGILID OF   | Expires:   | January 31,<br>2005 |  |  |  |  |  |
| subject t<br>Section 1<br>Form 4 c              | 51 A 1 E M E 1<br>16.  | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP SECURITIES   |  |                         |  |  | verage              |  |  |  |  |  |
| Form 5 obligation may con See Instruction 1(b). | ons tinue. Section 17(a) o   | nt to Section 16(a) of the fithe Public Utility Holadon 30(h) of the Investmen  | lding Comp   | oany Act of             | 1935 or Section  | Estimated average burden hours per response 0.5  of Reporting Person(s) to  eck all applicable)10% Owner |                     |  |  |  |  |  |
| (Print or Type                                  | Responses)   |   |  |                         |  |  |                     |  |  |  |  |  |
| 1. Name and A<br>Lee Vivian                     | Address of Reporting Pers<br>S   | Symbol  |  |                         |  | 5. Relationship of Reporting Person(s) to Issuer   |                     |  |  |  |  |  |
|   |  | MERRIMACK<br>PHARMACEU<br>[MACK]  | ΓICALS IN  | C                       | (Check all applicable)  _X_ Director 10% Owner Officer (give title Other (specify below) |  |                     |  |  |  |  |  |
| (Last)  | (First) (Midd  | le) 3. Date of Earliest T<br>(Month/Day/Year)   | Fransaction  |                         |  |  |                     |  |  |  |  |  |
| PHARMAC   | /O MERRIMACK 12/23/2014<br>HARMACEUTICALS, INC., ONE<br>ENDALL SQUARE, SUITE<br>7201 |   |  |                         |  |  |                     |  |  |  |  |  |
|   | Filed(Month/Day/Year) Applicable Line)   |   |  |                         |  | int/Group Filing(Check   |                     |  |  |  |  |  |
| CAMBRID   | GE, MA 02139   |   |  |                         | Form filed by More than One Reporting Person   |  |                     |  |  |  |  |  |
| (City)  | (State) (Zip   | Filed(Month/Day/Year)  Applicable Line)  _X_ Form filed by One Reporting Person  Form filed by More than One Reporting Person  [Zip)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  ion Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of 6. 7. Nature of y/Year) Execution Date, if Transactior(A) or Disposed of (D) Securities Ownership Indirect |  |                         |  |  |                     |  |  |  |  |  |
| 1.Title of<br>Security<br>(Instr. 3)            | an   | ecution Date, if Transacti  | on Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) |                         |  |  | Indirect            |  |  |  |  |  |
| Common<br>Stock                                 | 12/23/2014   | Code V  |  | (D) Price<br>A \$ 10.23 | (Instr. 3 and 4)<br>20,000   | D  |                     |  |  |  |  |  |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

|  | 1. Title of Derivative | 2. Conversion                                     | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4.<br>Transacti | 5.<br>orNumber | 6. Date Exerc<br>Expiration D |                    | 7. Title<br>Amount                |  | 8. Price of Derivative | 9. Nu<br>Deriv  |
|--|------------------------|---|--------------------------------------|-------------------------------|-----------------|----------------|-------------------------------|--------------------|-----------------------------------|--|------------------------|---|
|  |                        | or Exercise<br>Price of<br>Derivative<br>Security | (zuy/ real)                          | any (Month/Day/Year)          | Code (Instr. 8) | of             | (Month/Day/Year)<br>e         |                    | Underly<br>Securitic<br>(Instr. 3 | ying<br>ties                           | Security (Instr. 5)    | Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|  |                        |   |                                      |                               | Code V          | (A) (D)        | Date<br>Exercisable           | Expiration<br>Date | Title N                           | Amount<br>or<br>Number<br>of<br>Shares |                        |   |

## **Reporting Owners**

Relationships Reporting Owner Name / Address 10% Owner Officer Other Director

Lee Vivian S C/O MERRIMACK PHARMACEUTICALS, INC. ONE KENDALL SQUARE, SUITE B7201 CAMBRIDGE, MA 02139



# **Signatures**

/s/ Jeffrey A. Munsie, attorney-in-fact

12/23/2014

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

- 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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