FORM 3

(First)

CA

(State)

575 HIGH STREET, SUITE 201

(Last)

(Street)

(City)

PALO ALTO

(Middle)

94301

(Zip)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

OMB APPROVAL

OMB Number: 3235-0104

Estimated average burden
hours per response: 0.5

				3	SECURITIES			hou	urs per res	ponse: 0.5
					16(a) of the Securities Exchange A the Investment Company Act of 19					
Vivo Ventures V, LLC			2. Date of Event Requiring Statement (Month/Day/Year) 12/18/2012		3. Issuer Name and Ticker or Trading Symbol MEI Pharma, Inc. [MEIP]					
(Last) (First) (Middle) 575 HIGH STREET, SUITE 201		Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)					
(Street) PALO ALTO CA 94301 (City) (State) (Zip)					Officer (give title Other (specif below) below)		Ap	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Per X Form filed by More than One Reporting Person		ne Reporting Person ore than One
	, , , , ,		able I - Nor	n-Derivat	tive Securities Beneficial	ly Owned				
1. Title of Security (Instr. 4)				12	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)			of Indirect Beneficial Ownership	
Common Stock ⁽¹⁾					270,782	I	See	See footnote ⁽⁾		
		(e.			e Securities Beneficially ants, options, convertible		s)			
Expira			2. Date Exerc Expiration Day/ (Month/Day/	ate		Title and Amount of Securities nderlying Derivative Security (Instr. 4)		5. n Owners e Form: Direct (I	hip Be	Nature of Indirect eneficial Ownership nstr. 5)
			Date Exercisable	Expiration Date	n Title	Amount or Number of Shares	Price of Derivative Security	or Indire (I) (Instr	ect	
Warrants			12/18/2012	12/18/2017	7 Common Stock	24,401	3.12	I	Se	ee footnote ⁽²⁾
1. Name and Addres <u>Vivo Ventures</u>	s of Reporting Person*							·		
(Last) 575 HIGH STRE	(First) EET, SUITE 201	(Middle)								
(Street) PALO ALTO	CA	94301								
(City)	(State)	(Zip)								
1. Name and Addres <u>Vivo Ventures</u>	s of Reporting Person* <u>S Fund V, L.P.</u>									
(Last) 575 HIGH STRE	(First) EET, SUITE 201	(Middle)								
(Street) PALO ALTO	CA	94301								
(City)	(State)	(Zip)								
I	s of Reporting Person [*] S V Affiliates Fund	<u></u>								

Explanation of Responses:

1. Includes 24,401shares issuable upon the exercise of warrants that are exercisable within 60 days.

2. 243,856 shares and warrants exercisable for an additional 24,151 shares are held of record by Vivo Ventures Fund V, L.P., and 2,525 shares and warrants exercisable for an additional 250 shares are held of record by Vivo Ventures V Affiliates Fund, L.P. (together, the "Vivo V Funds"). Vivo Ventures V, LLC (the "Vivo V GP"), as the sole general partner of both of the Vivo V Funds, may be deemed to beneficially own the Common Stock of the Issuer owned by the Vivo V Funds. Vivo V GP disclaims beneficial ownership of the shares except to the extent of its pecuniary interest therein.

Remarks:

/s/ Albert Cha, Managing
Member of Vivo Ventures V,
LLC

/s/ Albert Cha, Managing
Member of Vivo Ventures
Fund V, L.P. and Vivo Ventures
V, LLC, its Genral Partner
/s/ Albert Cha, Managing
Member of Vivo Ventures V
Affiliates Fund, L.P. and Vivo
Ventures V, LLC, its General

** Signature of Reporting Person Date

Partner

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 5 (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.