FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGI</b>	ES IN BENEFI	ICIAL OW	NERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average bu	urden									

hours per response:

0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*     Glover Nicholas				2. Issuer Name <b>and</b> Ticker or Trading Symbol  MEI Pharma, Inc. [ MEIP ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Giovei	Micholas								,				X Director	•		10% Ow	ner	
(Last)	(F I PHARMA	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 07/28/2015							Officer below)	(give title		Other (s below)	pecify		
			101															
11975 EL CAMINO REAL, SUITE 101				4	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Ctroot)												Lin	*		_			
(Street) SAN DII	EGO C	A	92130										Form fi	ed by One I ed by More		•		
(City)	(S	state)	(Zip)										Person					
		т-	hla I Nam	Darivet			A		Diam		of as Dan	oficial	· · Oursed					
			ble I - Non						<del>-</del>		-		-					
Date			2. Transacti Date (Month/Day	Execution Date		Code (Instr.			(A) or . 3, 4 and	Beneficia Owned Fo	ily	y Form: y (D) or		7. Nature of Indirect Beneficial Ownership				
						v .	Amoun	t (A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)				
											f, or Benef		Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Code	action (Instr.	of Exp		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Securities Underlyin Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expir Date	ration	Title	Amoun or Numbe of Shares						
Option to purchase shares of common stock	\$1.57	07/28/2015		A		20,000		(1)	07/28	8/2025	Common Stock par value \$0.00000002	20,000	\$0.00	38,793	3	D		

## **Explanation of Responses:**

1. The options will vest in equal monthly installments over twelve months.

## Remarks:

/s/ Thomas M. Zech, as 07/29/2015 attorney-in-fact

\*\* 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.