FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washi

ngton, D.C. 20549	OMB APPROVAL

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028
	Estimated average burd	len
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:	0

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

1. Name and Address of Reporting Person* Reynolds Thomas C				2. Issuer Name and Ticker or Trading Symbol MEI Pharma, Inc. [MEIP]										ck all ap _l	olicable)	g Person(s) to Is		
(Last) (First) (Middle) C/O MEI PHARMA, INC.				3. Date of Earliest Transaction (Month/Day/Year) 12/19/2019										Offic belo	er (give title w)	Other below)	(specify	
3611 VALLEY CENTRE DRIVE, SUITE 500					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable				
(Street) SAN DIEGO CA 92130													Line)					
(City)	(Si	ate) (2	Zip)															
		Tabl	e I - Nor	n-Deriva	ative	Sec	curitie	s Ac	quired	, Dis	posed o	f, or	Bene	ficially	y Own	ed		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,			recution Date,		3. Transaction Code (Instr. 8) 4. Securities Acqui Disposed Of (D) (In			quired ((Instr. 3	A) or B, 4 and	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	· V	Amount	Amount (A) or (D)		Price	Transa	action(s) 3 and 4)		(Instr. 4)		
Common Stock 12/19				12/19/	/2019			P		10,000	0	A	\$1.6	10,000		D		
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)	rivative curity or Exercise Str. 3) Date (Month/Day/Year) Execution Date, (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) 8)		Date, Transaction Code (Instr.		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (Ir	Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	(A)	(D)	Date Exercis		Expiration Date	Title	Num of Share							

Explanation of Responses:

Remarks:

/s/ Brian G. Drazba, as attorney 12/19/2019 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.