FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Vashington, | D.C. | 20549 | |
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| | OMB / |
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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: |

| OMB APPROVAL | | | | | | | | |
|-------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burde | n | | | | | | | |
| 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* Williams Days D. Name Address of Reporting Person* | | | | 2. Issuer Name and Ticker or Trading Symbol MEI Pharma, Inc. [MEIP] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|--|--|--|--|---|---|--------------|--|---------------------|--|--------------------|---|---|--|-----------------------------------|--|-----------|-----|
| <u>Williams Bryan</u> | | | | - | | | | | - | | | X | Director | | | 10% Ow | ner |
| (Last) | (F I PHARMA | irst) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 09/21/2012 | | | | | | | Officer (below) | give title | | Other (s below) | pecify | |
| 11975 EL CAMINO REAL, SUITE 101 | | | | 4. | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) | EGO C | A | 92130 | | | | | | | Line) | | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | |
| Date | | | Transaction te onth/Day/ | Execution Date, | | Code (Instr. | | | 5. Amoun Securities Beneficial Owned Fo Reported | Form (D) or | Form: | : Direct I r Indirect E str. 4) C | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | Code | v / | Amount (A) or (D) | | Price | Transactio | ction(s) | | | iiisu. 4) | |
| | 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 | Code (| nsaction of Exp | | 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amour Securities Underly Derivative Security (Instr. 3 and 4) | | | derlying curity | ying Derivative | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Ownership of Form: B Direct (D) C | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expir Date | ration | Title | Amount or Number of Shares | | | | | |
| Options to purchase shares of common stock | \$0.71 | 09/21/2012 | | A | | 23,810 | | (1) | 09/21 | 1/2017 | Common Stock, par value \$0.00000002 per share | 23,810 | \$0 | 48,97 | ' 9 | D | |

Explanation of Responses:

1. One third of the options will vest on September 21, 2013; the remaining two thirds of the options will vest in equal monthly installments over the following twenty four months.

/s/ Bryan Williams 09/25/2012

** 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.