FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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STATEMENT	OF	CHANGES	IN BE	NEFICIAI	L OWN	IERSHIP

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden 0.5 hours per response:

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

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Name and Address of Reporting Person*     Bala Mohan						2. Issuer Name and Ticker or Trading Symbol Mersana Therapeutics, Inc. [ MRSN ]								eck all ap Dire	olicable) otor		son(s) to Iss	wner		
(Last)	•	First) HERAPEUTICS	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 10/25/2023										^ belo	,		Other (s below) ment Offic	. ,
840 MEMORIAL DRIVE						4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) CAMBRIDGE MA 02139						X Form filed by One Reporting Person Form filed by More than One Reporting Person														
(City)	(5	State)	(Zip)		Ru	Rule 10b5-1(c) Transaction Indication														
					X							action was ns of Rule					iction or writte	en plan	that is intend	ed to
		Tab	le I - No	n-Deriv	ative	Sec	uriti	ies Ac	quire	d, D	isp	osed o	of, o	r Ben	eficia	ly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)							Execution Date,			Transaction Dispose Code (Instr. 5)		rities Acquired (A) or ed Of (D) (Instr. 3, 4 a		I (A) or . 3, 4 and	d Secur Benef	icially d Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Cod	de V		Amount		(A) or (D)	Price	Trans	action(s) 3 and 4)	tion(s)		(111501.4)
Common Stock 10/25/						/2023		M <sup>(</sup>	1)		6,250	0	A \$0		1	10,645		D		
Common	Stock			10/26	5/2023		S <sup>(2</sup>	2)		1,912	2	D	\$1.1	3	8,733		D			
		Т	able II -	Deriva (e.g., p												/ Owne	t			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transa Code ( 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Yea		ate		7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and 4			8. Price of Derivativ Security (Instr. 5)		e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable		xpiration ate	Title	1	Amount or Number of Shares					
Restricted Stock Unit	(3)	10/25/2023			M			6,250	(4)	)		(4)		nmon	6,250	\$0	12,50	00	D	

## **Explanation of Responses:**

- 1. Represents shares of common stock received upon vesting of a portion of the restricted stock units ("RSUs") awarded to the Reporting Person on October 25, 2021.
- 2. Represents the sale of shares of common stock to satisfy the Reporting Person's tax withholding obligations in connection with the service-based vesting and settlement of the RSUs pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on May 10, 2023. The sale was effected through an automatic "sell to cover" transaction that did not represent a discretionary trade by the Reporting Person.
- 3. Each RSU represents the contingent right to receive one share of common stock of the Issuer.
- 4. 6,250 RSUs vested on October 25, 2023, and the remainder will vest in two equal installments on October 25, 2024, and October 25, 2025, subject to the Reporting Person's continued service to the Issuer on such vesting date.

/s/ Alejandra Carvajal, 10/27/2023 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.