FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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* Carvajal Alejandra						2. Issuer Name and Ticker or Trading Symbol Mersana Therapeutics, Inc. [MRSN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify						
	RSANA T	HERAPEUTICS,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/26/2023								X	below)	эреспу				
840 MEMORIAL DRIVE (Street)					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(City)			02139 (Zip)		,									Form filed by More than One Reporting Person						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Dat			2. Trans Date (Month/	action 2A. Deemed Execution Date, if any (Month/Day/Year)		,	Transaction Disposed Code (Instr. 5)		ties Acquired (A) or d Of (D) (Instr. 3, 4 and		or I 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 (Instr. 4)				
									-	Code	v	Amount	Amount (A) or (D)		ice	Transact (Instr. 3	ion(s)			(111501.4)
Common Stock 04/26					5/2023			M ⁽¹⁾		13,25	0 A		\$ <mark>0</mark>	24,270			D			
Common Stock 04/27					7/202	/2023 s ⁽²⁾ 3,944 D :			3.89	20,326			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)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year) ve	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				Exp	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	te ercisab		expiration Pate	Title	Amo or Num of Shar	ber					
Restricted stock unit	(3)	04/26/2023			M			13,250		(4)		(4)	Common Stock	13,	250	\$0	0		D	

Explanation of Responses:

- 1. Represents shares of common stock received upon the vesting of a portion of the restricted stock units ("RSUs") awarded to the Reporting Person on April 26, 2021.
- 2. Pursuant to automatic sell-to-cover instructions adopted by the Reporting Person on April 26, 2021, the shares were sold upon the vesting of the RSUs solely to cover applicable withholding taxes. The automatic sale instructions for the sell-to-cover were intended to comply with the requirements of Rule 10b5-1(c). The sale was not 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. The RSUs vested as to 50% of the shares on April 26, 2022 and as to 50% of the shares on April 26, 2023.

04/28/2023 /s/Alejandra Carvajal

** 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.