FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHA	NGES IN BENEFIC	IAL OWNERSHIP

l	OMB APPRO	VAL							
	OMB Number:	3235-0287							
Estimated average burden									
l	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

1. Name and Address of Reporting Person* WALT DAVID R						2. Issuer Name and Ticker or Trading Symbol Cerulean Pharma Inc. [CERU]										olicable)		Person(s) to Issuer 10% Owner	
	(F RULEAN F		3. Date of Earliest Transaction (Month/Day/Year) 11/25/2015									Offic below	er (give title w)		Other (specify below)				
840 MEMORIAL DRIVE							4. If Amendment, Date of Original Filed (Month/Day/Year)							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)	(S	tate) (Zip)																
		Tabl	le I - N	on-Deri\	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or E	Benefi	cially	Owne	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/						Execution Date,			3. 4. Securities Acquired (A) or Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3, 4 and 14				and 5) Secu Bene Own		icially d Following	6. Owner Form: Dir (D) or Ind (I) (Instr.	rect lirect	7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) or (D)	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 11/25/20)15		P		5,417	A	\$3.3	\$3.3659(1)		5,417				
Common Stock 11/27/20)15		P		6,700	A	\$3.2782(2)		12,117		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)	ive Conversion or Exercise (Month/Day/Year) Price of Derivative Security Date (Month/Day/Year) Execution Date, if any (Month/Day/Year)			4. Transa Code (8)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Number of Title Shares		t r		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form Direct or Ind (I) (Ins	t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. Represents the weighted average purchase price for shares purchased in multiple transactions. Purchase prices ranged from \$3.35 to \$3.41 per share. Upon request of the staff of the Securities and Exchange Commission, the issuer or a security holder of the issuer, the reporting person will provide full information regarding the number of shares purchased at each separate price.
- 2. Represents the weighted average purchase price for shares purchased in multiple transactions. Purchase prices ranged from \$3.25 to \$3.32 per share. Upon request of the staff of the Securities and Exchange Commission, the issuer or a security holder of the issuer, the reporting person will provide full information regarding the number of shares purchased at each separate price.

Remarks:

/s/ Alejandra Carvajal, as 11/30/2015 attorney-in-fact for David R. Walt

** 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.