FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL							
OMB Number:	3235-0287						
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0.5

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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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

							. ,												
1. Name and Address of Reporting Person* WALT DAVID R						2. Issuer Name and Ticker or Trading Symbol Cerulean Pharma Inc. [CERU]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
WILL DIVID K														X	Direc	ctor	10	% Ov	vner
(Last) (First) (Middle) C/O CERULEAN PHARMA INC.						3. Date of Earliest Transaction (Month/Day/Year) 02/10/2016									Offic belov	er (give title w)		her (s low)	specify
35 GATEHOUSE DRIVE				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)													Line) X Form filed by One Reporting F					n	
WALTH/	AM M.	A ()2451												Form filed by More than One Reporting Person				
(City)	(St	ate) (Zip)																
		Tabl	e I - N	on-Deriv	ative	Sec	uritie	s Ac	quired	l, Di	sposed o	f, or B	enefic	ially	Owne	ed			
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a				d 5)	Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(111501.4)		
Common Stock 02/10/20					2016	16		P ⁽¹⁾		4,500	A	\$2.07	754 ⁽²⁾	54 ⁽²⁾ 143,079		D			
Common Stock 02/11/20				2016	016		P ⁽¹⁾		4,350	A	\$2.03	2.0305(3)		147,429					
		Та	ble II								osed of, convertib				vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, /Day/Year)	4. Transa Code (8)			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deriv Secu (Inst	vative urity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	hip D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. These purchases were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on December 4, 2015.
- 2. Represents the weighted average purchase price for shares purchased in multiple transactions. Purchase prices ranged from \$2.01 to \$2.14 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.
- 3. Represents the weighted average purchase price for shares purchased in multiple transactions. Purchase prices ranged from \$1.97 to \$2.05 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/ Ronan O'Brien, as attorneyin-fact for David R. Walt

02/12/2016

** 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.