FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | | |
| hours per respons | e: 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* MICHEL GERARD J | | | | | | 2. Issuer Name and Ticker or Trading Symbol DELCATH SYSTEMS, INC. [DCTH] | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|---|--|----------|-------------|---|----------|---|--------|--|---------------|--------|---|---------------------------|--|--|--------------------------------|--------------------------|--|---|---------|--|
| | | | | | | | | | | | | - | | X | Direc | tor | | 10% O | wner | |
| (Last) | (Fi | rst) (N | Middle) | | 3. Da | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | X | Office below | icer (give title low) | | Other (below) | specify | |
| C/O DELCATH SYSTEMS, INC., | | | | | | 12/11/2020 | | | | | | | | | Chief Executive | | | Officer | | |
| 1633 BROADWAY, SUITE 22C | | | | | | | | | | | | | | | | | | | | |
| | | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) | | | 0010 | | | | | | | | | | | Line) X Form filed by One Reporting Person | | | | | | |
| NEW YO | ORK N | Y 1 | .0019 | | | | | | | | | | | Λ | | filed by Mo | J | | | |
| (City) | (9: | tate) (Ž | Zip) | | | | | | | | | | | | Perso | on | | | | |
| (City) | (3 | , , | | | <u> </u> | | | | | | | | | | | | | | | |
| | | Table | 1 - No | on-Deriva | tive S | Secui | rities | Acc | quirec | l, Dis | sposed of | , or B | enefic | ially | Own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/N | | | | | - 1 | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Al Disposed Of (D | | | Acquir (D) (Ins | ed (A) or str. 3, 4 ar | nd 5) Securi Benefi | | cially I Following | Form (D) o | vnership n: Direct r Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Tra | | action(s) . 3 and 4) | | | | |
| Common Stock 12/11/20 | | | |)20 | | P | | 7,500(1) | Α | \$13. | \$13.25 ⁽¹⁾ | | 7,500 | | 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 Date Execution Date, or Exercise (Month/Day/Year) if any | | ition Date, | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisal Expiration Date (Month/Day/Year) | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Ins: 3 and 4) | | Der | rice of ivative urity tr. 5) | ative derivative Securities | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | | |
| | | | | Co | | v | (A) | (D) | Date Exerc | isable | Expiration Date | Title | Amount or Number of Shares | er | | | | | | |

Explanation of Responses:

1. The shares were purchased in a confidentially marketed public offering pursuant to an underwriting agreement. The offering closed on December 11, 2020.

Remarks:

/s/ Gerard Michel

12/14/2020

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).