SEC For	m 5																	
FORM 5 UNITED STATES SECURITIES AND EXCHANGE COMMISSION																		
Check to Sec		Washington, D.C. 20549										OMB APPROVAL						
obligat Instruc	_ STATE	STATEMENT OF CHANGES IN BENEF OWNERSHIP								IAL	OMB Number: 3235-0362 Estimated average burden							
Form 3	3 Holdings Rep	orted.											hou	urs per r	esponse:	1	1.0	
X Form 4	X Form 4 Transactions Reported.   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 a	2. Issuer Name <b>and</b> Ticker or Trading Symbol DELCATH SYSTEMS, INC. DCTH									Relationship neck all app		Reporting Person(s) to Issuer le)						
Aharor											X Director 10% Owner Officer (give title Other (specify							
(Last) (First) (Middle) C/O ROSALIND ADVISORS, INC.				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/30/2021									Officer (give title Other (s below) below)					
175 BLC											L							
TOWER				4. If Amend	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)											X Form filed by One Reporting Person							
TORON											Form filed by More than One Reporting Person							
(City)	(St	ate) (																
		Table	I - Non-Deriva	ative Secu	rities	s Acc	luire	ed, Dis	posed	l of, d	or Be	neficia	ally Own	ed				
Date			Date (Month/Day/Year)	2A. Deemed Execution Date if any	e, T	3. Transaction Code (Instr					isposed	sed 5. Amount of Securities Beneficially Owned at end o		6. Ownership Form: Direct		7. Nature of Indirect Beneficial		
				(Month/Day/Year)		8)		Amoun	t	(A) or (D) Price		e	Issuer's Year (Ins 4)	Fiscal	(D) or Indire (Instr.	ct (I)	Ownership Instr. 4)	,
Convertible Note Payable																	By Rosalind Advisors,	
			08/05/2021			J4		2,000		А	\$1,198		2,000,000 <sup>(1)</sup>		I		Inc., the	
												,					advisor to the Rosalind Funds <sup>(2)</sup>	
		Ta	ble II - Derivat	ive Securit	ties	Acqu	ired	l, Disp	osed o	of, or	Ben	eficial	ly Owne	d		I		
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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expi	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporter Transact (Instr. 4)	ve es ially ng d tion(s)	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Benet ) Owne ct (Instr	direct ficial ership
				(A)	(D)	Date Exer	e rcisable	Expirati Date		OI N Of	umber							

Explanation of Responses:

1. As previously reported, on August 6, 2021, the Issuer executed an agreement to amend an aggregate of \$2,000 outstanding secured convertible notes payable to Rosalind Opportunities Fund I L.P. and Rosalind Master Fund L.P. to reduce the conversion price of the convertible notes to \$1,198 per share of the Company's Series E Convertible Preferred Stock and extend the maturity date of the convertible notes to October 30, 2024.

2. Each Reporting Persons disclaims beneficial ownership over the shares except to the extent of his or its respective pecuniary interest therein.

/s/ Gil Aharon

02/14/2022

\*\* 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.