FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Vashington, | D.C. | 20549 | |
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| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|-------------------|---------------|------------------|
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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* SALAMON STEVEN A J | | | | 2. Issuer Name and Ticker or Trading Symbol DELCATH SYSTEMS, INC. [DCTH] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|---|--|--------------------------------------|---|---|--|-------------------------------------|--------|------------------------------|---------------|--------------------------------------|---|---|------------------|--|---|--|---------------------------------------|-------|
| | VIOIV DI | LVLIVIII | | 3. D | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | \dashv | X | Directo Officer | r (give title | | 10% Ov Other (s | · | | |
| (Last) | , | , | (Middle) | 06/ | 06/12/2023 | | | | | | | | | below) | | | below) | |
| | | TREET WEST | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | |
| SUITE 3 | 526 | | | _ | | | | | | | | | X | Form f | iled by One | Rep | orting Perso | n |
| (Street) | | | | | | | | | | | | | | Form fi Persor | | e thar | n One Repo | rting |
| TORON' | TO A | 6 | M4Y 0G7 | _ Rı | Rule 10b5-1(c) Transaction Indication | | | | | _ \ | | | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | |
| Check this box to indicate that a transaction was made pursuant to a contra satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction | | | | | | | | on or written | plan t | that is intende | ed to | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | Execution Date, | | Transaction Dispose Code (Instr. 5) | | rities Acqui d Of (D) (In | | and Securitie Benefici Owned F | | es For ally (D) | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | Code | v | Amount | (A) or (D) | | - 1 | | ransaction(s) | | | (Instr. 4) | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| | | | , , | 1 / | calls | ' | | s, options | <u> </u> | | | | _ | | | | | |
| 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) (Month/Day/Year) | | | | | ate | ate Amount of | | | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | | epiration ate | Title | Amount or Number of Shares | | | | | | |
| Stock Option (Right to Buy) | \$7.25 | 06/12/2023 | | A | | 19,682 | | (1) | 06 | 5/12/2033 | Common Stock | 19,682 | : | \$0.00 | 19,682 | | D | |

Explanation of Responses:

1. The option will vest and become exercisable at the rate of one-twelfth (1/12th) per month with the first such vesting to occur on July 12, 2023 and monthly thereafter for so long as the reporting person remains a director of Delcath Systems, Inc. (and subject to the terms and conditions of the Delcath Systems, Inc. 2020 Omnibus Equity Incentive Plan, as amended).

Remarks:

/s/ Gerard Michael, Attorneyin-Fact ** Signature of Reporting Person

06/22/2023

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.