# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person* Boilen Scott				2. Issuer Name and Ticker or Trading Symbol Checkpoint Therapeutics, Inc. [CKPT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last) (First) (Middle) 2 GANSEVOORT STREET, 9TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 06/15/2017							/Year)	Office	er (give title belo	ow)	Other (specify b	elow)	
(Street)					4. If Amendment, Date Original Filed(Month/Day/Year)							_X_ Form fi	6. Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
NEW YO	ORK, NY	10014												ed by Wore than	One reporting	cison	
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Da any (Month/Day/		Date, if	(Instr. 8)		(A) or Disposed of		of (D	Beneficia Reported	nt of Securities ally Owned Following Transaction(s)		Ownership of Form:	Beneficial	
								ode	V	Amou	(A) or (D)	Pric	(Instr. 3 a	nd 4)			Ownership (Instr. 4)
COMMON STOCK 06		06/15/2017					A		10,00	0 A	\$ 0	82,222	(2)		D		
			Table II - I					tl	he fo	rm dis	splays a of, or Ben	curr eficia	ently valid	OMB conf	spond unle trol numbe		
1. Title of	l <sub>2</sub>	3. Transaction	,	<i>e.g.</i> , put	s, calls	s, wai					tible secu		) Title and	Q Dries of	O. Maranham	of 10.	11. Natur
	Conversion or Exercise Price of Derivative Security	Date	Execution Dat	te, if Tr	if Transaction N Code ar) (Instr. 8) I				6. Date Exercisable and Expiration Date (Month/Day/Year)		An Un Sec	nount of derlying curities str. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	nip of Indirect Beneficia Ownershi (Instr. 4)	
					Code	v	(A)	]	Date Exerci		Expiratio Date	n Tit	Amount or Number of Shares				

#### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Boilen Scott 2 GANSEVOORT STREET, 9TH FLOOR NEW YORK, NY 10014	X						

## **Signatures**

/s/ James F. Oliviero, Attorney-in-Fact	06/15/2017		
**Signature of Reporting Person	Date		

### **Explanation of Responses:**

- \* 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).
- (1) The 10,000 shares of restricted Common Stock will vest on June 15, 2020.
- (2) Includes 60,000 shares of restricted Common Stock which vest over various time periods.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.