FORM 4

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

OMB APPROVAL
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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).

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

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1. Name and Address of Reporting Person* GRAY WILLIAM GARRETT (Last) (First) (Middle) 2 GANSEVOORT STREET,, 9TH FLOOR (Street) NEW YORK, NY 10014			2. Issuer Name and Ticker or Trading Symbol Checkpoint Therapeutics, Inc. [CKPT] 3. Date of Earliest Transaction (Month/Day/Year) 05/21/2020 4. If Amendment, Date Original Filed(Month/Day/Year)						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X_Officer (give title below) Other (specify below) See Remarks 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person uired, Disposed of, or Beneficially Owned					
)						
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					es Acqui						
(Instr. 3) Da		2. Transaction Date (Month/Day/Year)		(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Following	6. Ownership Form:	Beneficial	
				(Month/Day/Year	Code	V	Amount	(A) or (D)	Price	(Instr. 3	and 4)		\ /	Ownership (Instr. 4)
		05/21/2020		S ⁽¹⁾)	17,104	4 D	\$ 1.995	359,896 (3)			D		
Reminder:	Report on a s	separate line fo	or each class of secu	rities beneficially o	wned direc	Pers	ons who	respo			ction of inf			1474 (9-02)
Reminder:	Report on a s	separate line fo	Table II -	Derivative Securit	ies Acquir	Persont cont the f	sons who tained in form dis	respo this fo plays a	orm are a currer eneficiall	not requ ntly valid	ired to res	ormation spond unle rol numbe	ss	1474 (9-02)
1. Title of Derivative Security	•	3. Transaction	n 3A. Deemed Execution Day	Derivative Securit (e.g., puts, calls, w 4. tte, if Transaction Code Year) (Instr. 8)	ies Acquir arrants, op	Pers confitted the file of the	sons who tained in form dissisposed of the converting terms of the converting	f, or Be	orm are a currer eneficiall urities) 7. Ti Amo Undd Secu (Inst 4)	not requ ntly valid	OMB conf	spond unle	of 10. Ownersl Form of Derivati Security Direct (1 or Indire	11. Natur of Indirec Beneficia Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
GRAY WILLIAM GARRETT 2 GANSEVOORT STREET, 9TH FLOOR NEW YORK, NY 10014			See Remarks			

Signatures

/s/ Garrett Gray	05/22/2020	
**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).
- In connection with the vesting of 50,000 shares, these shares were sold by the Company's restricted stock administrator in order to satisfy Mr. Gray's tax withholding
- (1) obligations. Mr. Gray had no discretion with respect to such sale, which was transacted automatically in accordance with the Company's corporate policies regarding the vesting of restricted stock.
- Represents the weighted average price of the shares sold in this transaction. The range of prices for such transaction was \$1.98 to \$2.031. The reporting person undertakes to (2) provide upon request by the Securities and Exchange Commission staff, the issuer, or a shareholder of the issuer, full information regarding the number of shares sold at each
- (2) provide upon request by the Securities and Exchange Commission staff, the issuer, or a shareholder of the issuer, full information regarding the number of shares sold at each separate price.
- (3) Includes shares of restricted Common Stock, which vest over various time periods

Remarks:

Principal Financial Officer, VP Finance and Accounting

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.