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

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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

1. Name and Address of Reporting Person * GRAY WILLIAM GARRETT			2. Issuer Name and Ticker or Trading Symbol Checkpoint Therapeutics, Inc. [CKPT]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
· /	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/10/2022				X Officer (give title below) Other (specify below) Chief Financial Officer						
		4. If Amendment, Date Ori			inal Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
	(Zip)	7	able I - N	on-De	rivative S	Securition	es Acqui	red, Disp	osed of, or l	Beneficially	Owned	
Date	2. Transaction Date (Month/Day/Year)	any	f Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	Reported Transaction(s)			Ownership Form:	Beneficial
		(Month/Day/Year		· V	Amoun	(A) or (D)	Price	(Instr. 3	3 and 4)		or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
03/	10/2022		S(1)		38,197	7 D	\$ 1.893	543,91	0 (3)		D	
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Derivative Conversion Date Security or Exercise (Month/Day/Year)	3A. Deemed Execution Da any	4. Transaction Code	5. Number of	6. I	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Ti	ount of			of 10. Owners Form of	11. Natu
	(Month/Day/\	Year) (Instr. 8)	Derivati Securitic Acquire (A) or Dispose of (D) (Instr. 3 4, and 5	es d d				rities r. 3 and	(Instr. 5)	Owned Following Reported Transaction	Derivat Security Direct (or Indir	Beneficial Ownersh (Instr. 4)
1	ARRETT First) ITE 110 Street) 453 State) 2. T Date (Mo	ARRETT First) (Middle) ITE 110 Street) 453 State) (Zip) 2. Transaction Date (Month/Day/Year) 03/10/2022 Table II - I (Transaction ate Execution Date (Month/Day/Year)	ARRETT Checkpoint T First) (Middle) 3. Date of Earlies 03/10/2022 Street) 4. If Amendment 453 State) (Zip) T 2. Transaction Date (Month/Day/Year) 2A. Deemed Execution Date, if any 4A. Transaction Code 2A. Deemed Execution Date, if any 4A. Tran	ARRETT Checkpoint Therapeu 3. Date of Earliest Transac 03/10/2022 Street) 4. If Amendment, Date Ori 5. Code (Instr. 8) Code (Instr. 8) Code (Instr. 8) Table II - Derivative Securities Acqu (e.g., puts, calls, warrants, Transaction ate 3. Transaction Securities beneficially owned directly of the company	ARRETT Checkpoint Therapeutics, I 3. Date of Earliest Transaction (No. 3/10/2022 Street) 4. If Amendment, Date Original I 4. Deemed Execution Date, if any (Month/Day/Year) Code (Instr. 8) Code V Code V Code V Table II - Derivative Securities Acquired, I (e.g., puts, calls, warrants, option of Code (Month/Day/Year) Transaction and Execution Date, if Transaction Number and Code (Month/Day/Year) Transaction and Code (Month/Day/Year)	ARRETT Checkpoint Therapeutics, Inc. [CK] Street) 3. Date of Earliest Transaction (Month/Day) 03/10/2022 4. If Amendment, Date Original Filed(Month) 4. State) 2. Transaction Date (Month/Day/Year) 3. Transaction (Month/Day/Year) 4. Securion Date (Instr. 8) 4. Scurion Date (Month/Day/Year) 4. Scurion D	ARRETT Checkpoint Therapeutics, Inc. [CKPT] 3. Date of Earliest Transaction (Month/Day/Year) 03/10/2022 4. If Amendment, Date Original Filed(Month/Day/Yea) 4. Securities Accurate Instruction Date, if any (Month/Day/Year) 4. Securities Accurate Instruction Date, if (Instr. 8) (Instr. 3, 4 and 10) 4. Or (Instr. 8) (Instr. 3, 4 and 10) 4. Or (Instr. 3) (A) Or (Instr. 3) 4. Table II - Derivative Securities Acquired, Disposed of, or Bransaction (e.g., puts, calls, warrants, options, convertible securities and Execution Date, if Transaction Date and Expiration	ARRETT Checkpoint Therapeutics, Inc. [CKPT] Sirret) 3. Date of Earliest Transaction (Month/Day/Year) 03/10/2022 4. If Amendment, Date Original Filed(Month/Day/Year) 2. Transaction Date Execution Date, if (Month/Day/Year) 2A. Deemed Execution Date, if (Month/Day/Year) (Month/Day/Year) 2. Transaction Date (Instr. 8) (Instr. 3, 4 and 5) (Month/Day/Year) Code V Amount (D) Price 3. Transaction (A) or Disposed of (D) (Instr. 3, 4 and 5) (Month/Day/Year) Signature (D) Price 3. Transaction (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) Or Disposed of (D) (Instr. 8) (A) Or Disposed of (D) (Instr. 8) (B)	ARRETT Checkpoint Therapeutics, Inc. [CKPT] Direct	ARRETT Checkpoint Therapeutics, Inc. [CKPT] Checkpoint Therapeutics, Inc. [CKPT] Director	ARRETT Checkpoint Therapeutics, Inc. [CKPT] (Check all applic Director X Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (Month/Day/Year) (As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (Chief Financial (1974)) As Date of Earliest Transaction (Month/Day/Year) (As Officer (give title below) (As Office	Checkpoint Therapeutics, Inc. [CKPT] Check all applicable Checkpoint Therapeutics, Inc. [CKPT] Check all applicable Checkpoint Therapeutics, Inc. [CKPT] Director Check all applicable Checkpoint Therapeutics Check all applicable Checkpoint Therapeutics Chec

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
GRAY WILLIAM GARRETT 95 SAWYER RD, SUITE 110 WALTHAM, MA 02453			Chief Financial Officer				

Signatures

/s/ Garrett Gray	03/11/2022
**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 72,750 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 \$1.8601 to \$1.9122. The reporting person undertakes
- (2) to 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.

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.