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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

affirmative defense 10b5-1(c). See Ins	conditions of Rule truction 10.								
1. Name and Addres WEISS MICH	s of Reporting Person*		2. Issuer Name and Ticker or Trading Symbol Checkpoint Therapeutics, Inc. [CKPT]		ionship of Reporting Perso all applicable) Director	n(s) to Issuer			
(Last) (First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/14/2024		Officer (give title below)	Other (specify below)				
95 SAWYER RO	OAD, SUITE 110		4. If Amendment, Date of Original Filed (Month/Day/Year)	Individual or Joint/Group Filing (Check Applicable Li X Form filed by One Reporting Person					
(Street)				Form filed by More than One Reporting		•			
WALTHAM	MA	02453			Toffi filed by More triair	One Reporting Ferson			
(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 Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
COMMON STOCK	05/14/2024		A		32,051(1)	A	\$0.00	62,174(2)	I	See Note 3 ⁽³⁾
COMMON STOCK	05/14/2024		A		50,000(4)	A	\$0.00	112,174(2)	I	See Note 3 ⁽³⁾

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	 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Ir 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	(I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

Explanation of Responses:

- 1. The 32,051 shares of restricted Common Stock will vest on May 14, 2027, subject to Mr. Weiss's continued service on the board on such date.
- 2. Includes restricted shares of Common Stock which vest over various time periods, subject to Mr. Weiss's continued service on the board.
- 3. The shares are held by Hawkins BioVentures, LLC, of which Mr. Weiss is the sole member.
- 4. The 50,000 shares of restricted Common Stock will vest according to the following schedule, subject to Mr. Weiss's continued service on the board on each date: one third on May 14, 2027, one third on May 14, 2028, and one third on May 14, 2029.

/s/ James F. Oliviero, Attorney-in-05/16/2024

Fact

** 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.