SEC For	m 4 FORM	4	UNITED S	TATE	s si					ANGI	E CC	оммі	SSION					
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).				Filed pu	rsuant	CHA to Sectio	<b>NG</b>   n 16(	ington, D.C. 20 ES IN BE	NEFI		HIP	OMB Estima	Numbe ated av	APPRO	3235-0287			
1. Name and Address of Reporting Person*     Heath-Chiozzi Margo     (Last)   (First)   (Middle)     C/O CELLDEX THERAPEUTICS, INC.     53 FRONTAGE ROAD, SUITE 220     (Street)     HAMPTON   NJ   08827     (City)   (State)   (Zip)     Table I - Non-Deriv     1. Title of Security (Instr. 3)   2. Transition					Issuer Date o Date o 5/13/2 If Ame	Name ar <u>ex</u> The of Earliest 024 indment, 10b5- ix this box ffirmative curitie 2A. Deem	nd Tic rape Tran Date 1(C) to ind defent	cker or Trading eutics, Inc saction (Month of Original File ) Transac licate that a tran se conditions of cquired, Di 3.	X ] Day/Yea dicati s made pu 1(c). See of, or urities Ad	(Check all applicat Director ♥ Officer (g below) SVP OF F (Year) 6. Individual or Joi Line) ♥ Form file Person Cation de pursuant to a contract, instruction of . See Instruction 10. F, or Beneficially Owned es Acquired (A) or 5. Amount			able) give title REGUL pint/Group ed by One ed by Mor or written p	10% Owner   ve title Other (specify below)   EGULATORY AFFAIRS   t/Group Filing (Check Applicable   by One Reporting Person   by More than One Reporting   written plan that is intended to satisf   of 6. Ownership   7. Nature				
Date (Month/E					Execution Date, if any (Month/Day/Yea)		Code (Inst	) Code (Instr. 5) 8)		Of (D) (Instr. 3, 4 and (A) or (D) Price		Securitie Beneficia Owned F Reported Transacti (Instr. 3 a	ollowing on(s)	(D) oi	r Indirect E str. 4) 0	ndirect Beneficial Dwnership Instr. 4)		
			Table II - Der (e.g					quired, Dis s, options,					Owned			I		
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/Yea	4. Transactior Code (Instr. 8)				6. Date Exercisable an Expiration Date (Month/Day/Year)		of S Und Deri	7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expirati Date	on Title		Amount or Number of Shares						
Incentive Stock Option (right to buy) <sup>(1)</sup>	\$36.43	06/13/2024 <sup>(1)</sup>		Α		82,000		06/13/2025 <sup>(2)</sup>	06/13/20		nmon :ock	82,000	\$0	82,00	0	D		

Explanation of Responses:

1. Represents option granted by the Issuer pursuant to its 2021 Omnibus Equity Incentive Plan.

2. 25% vest on June 13, 2025 and the remainder vest quarterly (in equal amounts) over the subsequent 12 quarters.

/s/ Sam Martin, attorney-in-fact	06/12	
for Margo Heath-Chiozzi	00/1	

\*\* Signature of Reporting Person

7/2024

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  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.