FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
II 6	0.5									

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

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* <u>Cavanaugh Sarah</u>					2. Issuer Name and Ticker or Trading Symbol Celldex Therapeutics, Inc. [ CLDX ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last)	`	irst) ERAPEUTICS,	(Middle)			Date o		Trans	saction (Mon	th/D	ay/Year)		below)		Other (spelow) FFAIRS & ADN		,		
53 FRONTAGE ROAD, SUITE 220					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) HAMPTON NJ 08827												Form filed by One Reporting Person  Form filed by More than One Reporting  Person							
(City) (State) (Zip)					R	Rule 10b5-1(c) Transaction Indication													
						Check this box to indicate that a transaction was made pursuant to a the affirmative defense conditions of Rule 10b5-1(c). See Instruction													
		Tal	ole I - Non	ı-Deriv	vativ	e Se	curitie	s Ac	quired, D	)isp	osed o	f, or Bei	neficiall	y Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) or I Of (D) (Instr. 3, 4 a			es Formally (D) (Following (I) (I		Direct Ir Indirect B str. 4) C	7. Nature of ndirect Beneficial Ownership			
								Code	,	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)		
			Table II - I						uired, Dis					Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transaction Code (Instr. 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 Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (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						
Incentive Stock Option (right to buy) <sup>(1)</sup>	\$36.43	06/13/2024 <sup>(1)</sup>			A		78,000		06/13/2025 <sup>(2)</sup>	2) (	06/13/2034	Common Stock	78,000	\$0	78,000	)	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 for Sarah Cavanaugh 06/17/2024

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.