FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-								
Estimated average burden								
hours per response:	0.5							

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

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*  CONRAD HERBERT J					2. Issuer Name <b>and</b> Ticker or Trading Symbol Celldex Therapeutics, Inc. [ CLDX ]							relationship of eck all applic	cable) or	g Perso	10% Ow	ner	
(Last) (First) (Middle) C/O CELLDEX THERAPEUTICS, INC. 53 FRONTAGE ROAD						3. Date of Earliest Transaction (Month/Day/Year) 06/18/2020								(give title		Other (s <sub>i</sub> below)	pecify
(Street)			08827		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	•	(Zip)	Davis													
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				saction	action 2A. Deemed Execution Date,		3. Transactio	de (Instr. 5)		ed (A) or str. 3, 4 and	5. Amour Securitie Beneficia Owned F Reported	nt of 6. Ones Formally (D) of following (I) (II		Direct C Indirect E tr. 4) C	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						/e Securities Acquired, Disposed of, or Beneficially Owned ts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Di if any (Month/Day/	Date, Tra	Transa Code (l				6. Date Exercisable an Expiration Date (Month/Day/Year)		of Securit Underlyin	g e Security	8. Price of Derivative Security (Instr. 5)		e (Ces Fally [Ces General Ces	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Non- Qualified Stock Option (right to buy) <sup>(1)</sup>	\$10.38	06/18/2020			A		11,000		06/18/2021	06/18/203	Common Stock	11,000	\$0.00	11,000	0	D	

## **Explanation of Responses:**

 $1. \ Represents option \ granted \ by \ the \ Issuer \ pursuant \ to \ its \ 2008 \ Stock \ Option \ and \ Incentive \ Plan.$ 

/s/ Samuel B. Martin, attorney in fact for Herbert J. Conrad

06/19/2020

\*\* 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.