FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|-------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |     |  |  |  |  |  |  |  |  |  |
|--------------------------|-----|--|--|--|--|--|--|--|--|--|
| OMB Number: 3235-02      |     |  |  |  |  |  |  |  |  |  |
| 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

| Name and Address of Reporting Person*     Hoang Tsvetelina P                            |  |   |   |  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol  Marker Therapeutics, Inc. [ MRKR ]  |   |  |                    |                           |  |   |                                  | Check  | all applic<br>Directo<br>Officer   | icable)<br>or<br>r (give title   |  | 10% Ow<br>Other (s   | vner                                  |  |
|---|--|---|---|--|---|---|--|--------------------|---------------------------|--|---|----------------------------------|--|--|--|--|--|---------------------------------------|--|
| Last) (First) (Middle) C/O MARKER THERAPEUTICS, INC. 1200 SOUTHWEST FREEWAY, SUITE 2240 |  |   |   |  |   | 3. Date of Earliest Transaction (Month/Day/Year) 03/10/2020 |  |                    |                           |  |   |                                  |  | VP, Research and Development   |  |  |  |                                       |  |
|   |  |   |   | 4. If Amendment, Date of Original Filed (Month/Day/Year)   |   |   |  |                    |                           |  |   |                                  | ,  |  |  |  |  |                                       |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned        |  |   |   |  |   |   |  |                    |                           |  |   |                                  |  |  |  |  |  |                                       |  |
| Date  |  |   |   | Execution Date, if any   |   | e, Ti<br>C  | , Transaction Code (Instr.   |                    |                           |  |   | nd                               | Securities<br>Beneficially<br>Owned Following  |  |  |  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership  |                                       |  |
|   |  |   |   |  |   |   |  | Code               | ,                         | Amount   | (A) or<br>(D)                                   | Price                            | .  | Transact   | tion(s)  |  |  | (Instr. 4)                            |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned           |  |   |   |  |   |   |  |                    |                           |  |   |                                  |  |  |  |  |  |                                       |  |
| 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security                   | 3. Transaction<br>Date<br>(Month/Day/Year)                 | 3A. Deemed<br>Execution Date<br>if any  | 4.<br>Trai  | nsactio  | 5. Number of  |   | 6. Date Exercis<br>Expiration Date   |                    | rcisa<br>Date             | ıble and   | 7. Title and Amo<br>of Securities<br>Underlying |                                  | t 8.<br>De   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)  | derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported   | ly   | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4   | Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |  |   | Cod   | ie V   | (A)   | (D)   |  |                    |                           |  | Title   | or<br>Numbe<br>of                | r  |  |  |  |  |                                       |  |
| \$2.12  | 03/10/2020   |   | A   |  | 14,600  |   |  | (1)                | 03                        | 3/10/2030  | Common<br>Stock                                 | 14,60                            | 0  | \$0.00   | 14,600   | )  | D  |                                       |  |
| \$2.12  | 03/10/2020   |   | A   |  | 25,400  |   |  | (2)                | 03                        | 3/10/2030  | Common<br>Stock                                 | 25,400                           | 0  | \$0.00   | 25,400   | )  | D  |                                       |  |
|   | Conversion or Exercise Price of Derivative Security \$2.12 | (First)  RKER THERAPEUTICS, I  UTHWEST FREEWAY, SU  DN TX  (State)  Tab  Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  \$2.12 03/10/2020 | (First) (Middle)  RKER THERAPEUTICS, INC.  UTHWEST FREEWAY, SUITE 2240  DN TX 77027  (State) (Zip)  Table I - Non-D  Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  \$2.12 03/10/2020 | (First) (Middle)  RKER THERAPEUTICS, INC.  UTHWEST FREEWAY, SUITE 2240  DN TX 77027  (State) (Zip)  Table I - Non-Derivate (Month/Day)  Table II - Derivative (e.g., put (e.g., put (Month/Day)/Year))  2. Conversion or Exercise Price of Derivative Security  Security  3. Transaction Date (Month/Day)/Year)  (Month/Day)/Year)  Security  3. Transaction Date (Month/Day)/Year)  Conversion or Exercise Price of Derivative Security  A Deemed Execution Date, if any (Month/Day)/Year)  Coc Security  A A | (First) (Middle)  RKER THERAPEUTICS, INC.  UTHWEST FREEWAY, SUITE 2240  Table I - Non-Derivative Security (Instr. 3)  Table II - Derivative Security (Month/Day/Year)  Table II - Derivative Security (Month/Day/Year)  Table II - Derivative Security (Month/Day/Year)  A. Transaction Date (Month/Day/Year)  (Month/Day/Year)  Table II - Derivative Security (Month/Day/Year)  A. Transaction Date (Month/Day/Year)  Code (Instr. 3)  Code V | Marker The   Marker The   Marker The                        | Marker Therape   Mark | Marker Therapeutic | Marker Therapeutics, Inc. | Code   V   Code   V   Code   Code | Marker Therapeutics, Inc.   MRKR                | Marker Therapeutics, Inc.   MRKR | Marker Therapeutics, Inc.   MRKR     (Common Privation Private   Marker Therapeutics, Inc.   MRKR   (Code   V   Manount   Marker Therapeutics, Inc.   MRKR   (Code   V   Marker Therapeutics, Inc.   Marker Therapeutics, Inc. | Marker Therapeutics, Inc.   (Check X   Marker Therapeutics, Inc.   (Check X   Marker Therapeutics, Inc.   (Month/Day/Year)   (Month/Day/Year)   (State)   (Zip)   (State)   (Zip)   (State)   (Zip)   (State)   (Zip)   (State)   (Zip)   (A. If Amendment, Date of Original Filed (Month/Day/Year)   (Month/Day | Marker Therapeutics, Inc.   MRKR     Check all applic Director Officer D | Marker Therapeutics, Inc.   Marker   Marker Therapeutics, Inc.   Marker   Marker Therapeutics, Inc.   Marker The | Check all applicable   Check all applicable | Marker Therapeutics, Inc.   MRKR      |  |

- 1. Represents a bonus for 2019 performance granted under the Company's 2014 Omnibus Stock Ownership Plan. This option vests in equal monthly installments over a four year period commencing on April 10, 2020 subject to the continued service by the Reporting Person to the Issuer as of the applicable vesting date.
- 2. This option vests in equal monthly installments over a four year period commencing on April 10, 2020 subject to the continued service by the Reporting Person to the Issuer as of the applicable vesting date.

## Remarks:

/s/ Michael Loiacono, Attorney-in-Fact

03/12/2020

\*\* 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.