FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Vashington D.C. 20549				
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	PROVAL
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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

						()			ompany Act							
Name and Address of Reporting Person* Dietz Thomas John				2. Issuer Name and Ticker or Trading Symbol <u>LEAP THERAPEUTICS, INC.</u> [LPTX]						(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)						- ^		give title		Other (sp	·
, ,	`	•	(Middle)	Ľ	7575172											
C/O LEAP THERAPEUTICS, INC.			4	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable					
47 THORNDIKE STREET SUITE B1-1										Line)	e) X Form filed by One Reporting Person					
											^		,	•	One Report	ina
(Street)	ID CE I		00141									Person		e illall	One Report	"' ¹⁹
CAMBRIDGE MA 02141			<u></u> ⊦.		4055	4 / - \	T	4: 11	4:							
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication											
					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy											
					the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date			2. Transact	Execution Date,		3. 4. Securities Acquired (A)								. Nature of		
			Date (Month/Day				Code (Instr.		d Of (D) (Instr. 3, 4 and		Beneficia Owned Fo	ly (D) or		r Indirect B str. 4) O	ndirect Beneficial Dwnership	
							Code V	—	(A) o	r	Reported Transacti			(1	Instr. 4)	
				Code V Amount (C)						Price	(Instr. 3 and 4)					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																
					' '											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 Dat if any (Month/Day/Ye	ate, Transaction Code (Instr.		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)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
											Amount or		(Instr. 4)	(5)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Number of Shares					
Stock Option (Right to Buy)	\$0.34	03/31/2023		A		175,000		(1)	03/31/2033	Common Stock	175,000	\$0	175,00	00	D	

Explanation of Responses:

1. The Option was granted pursuant to Leap's 2022 Equity Incentive Plan. By its terms, the Option shall vest and become exercisable for the shares underlying the Option in a series of 4 quarterly installments on each of March 31, 2023, June 30, 2023, September 30, 2023, and December 31, 2023 for so long as the reporting person continues to be a director, consultant or service provider of the Company until the Option is fully vested.

/s/ Douglas E. Onsi as attorney-04/04/2023 in-fact for Thomas Dietz

** 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.