FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response | e: 0.5 | | | | | | | |

| \Box | Check this box if no longer subject to Section 16. Form 4 or Form 5 |
|---------------|---|
| $\overline{}$ | obligations may continue. See |
| | Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* AGENUS INC | | | | | 2. Issuer Name and Ticker or Trading Symbol MiNK Therapeutics, Inc. [INKT] | | | | | | | | | Relationship of Reporting Person(s) to Iss (Check all applicable) Director X 10% Ow. | | | | | | |
|--|---|--|---|---|---|--|---|--|---------------|------------------------------|----------------------------------|---------------|-------------------------------------|---|--|--|---------|--|--|--|
| (Last) | ` | irst) (I | st) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/10/2023 | | | | | | | | | er (give title | | Other (below) | | |
| 3 FORBES ROAD | | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Ap Line) | | | | | |
| (Street) LEXING | GTON M | A 02421 | | | | | | | | | | | | X Form filed by One Reporting P Form filed by More than One P Person | | | | | | |
| (City) (State) (Zip) | | | | | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | | |
| | | | | | | | | | | | ansaction was ditions of Rule | | | | | truction or wri | tten p | olan that is in | tended to | |
| | | Table | I - N | lon-Deriva | tive S | ecu | rities | Ac | quire | d, Di | sposed o | f, or E | Benefic | ially | Owr | ned | | | | |
| Date | | | 2. Transaction Date (Month/Day/Ye | Exec Year) if any | | eemed ution Date, th/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securities Disposed Of | | | | | | | icially d | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | | | | | . , | |
| Common Stock | | | | 05/10/2023 | | | | | P | | 22,065 | A | \$1.50 (2) | | | 617,112 | | D | | |
| Common Stock | | | | 05/11/202 | /11/2023 | | | | P | | 23,361 | A | \$1.427 | | | 640,473 |),473 D | | | |
| | | Tab | ole I | I - Derivativ (e.g., pu | | | | | | | posed of, convertil | | | | Owne | d | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Exe if a | Deemed ecution Date, ny unth/Day/Year) | 4. Transa Code (8) | | | vative irities uired or osed) r. 3, 4 | Expir (Mon | te Exe ration I th/Day | | | int of rities rlying ative | | | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | , | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Naturo of Indirect Beneficia Ownershi (Instr. 4) | |

Explanation of Responses:

- 1. Open market purchases reported on this line occurred at a weighted average price of \$1.509 (range of \$1.47 to \$1.54).
- 2. Agenus Inc. undertakes to provide (upon request by the SEC staff, the issuer or a security holder of the issuer) full information regarding the number of shares purchased at each separate price.
- 3. Open market purchases reported on this line occurred at a weighted average price of \$1.4275 (range of \$1.38 to \$1.495).

/s/ Christine Klaskin, Vice President, Finance

05/12/2023

** 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.