FORM 4

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

Washington, D.C. 20549

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### nger subject to

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the

#### 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

affirmative defense 10b5-1(c). See Instr							
Name and Address of Reporting Person*  Lu Lucy			2. Issuer Name and Ticker or Trading Symbol Fortress Biotech, Inc. [FBIO]		onship of Reporting Person(s all applicable) Director	) to Issuer	
(Last)	(First) (Middle) RTRESS BIOTECH, INC. ANE CONCOURSE SUITE 301		3. Date of Earliest Transaction (Month/Day/Year) 01/01/2025		Officer (give title below)	Other (specify below)	
	<i>'</i>	01	4. If Amendment, Date of Original Filed (Month/Day/Year)	Individual or Joint/Group Filing (Check Applicable Lin X Form filed by One Reporting Person Form filed by More than One Reporting Person			
BAY HARBOR ISLANDS	FL	33154					
(City)	(State)	(Zip)					

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Ad Disposed Of (D			Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
common stock, par value \$0.001	01/01/2025		A		49,383(1)	A	\$0	61,273(2)	D	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, 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 Date, if any (Month/Day/Year)	4. Transac Code (In 8)		5. Num Derivat Securit Acquire or Disp (D) (Ins	tive ties ed (A) oosed of	6. Date Exerc Expiration Day/\(\text{Month/Day/\}\)	ate	7. Title and A Securities Un Derivative Se (Instr. 3 and	nderlying ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	derivative Securities Form: EBeneficially Direct (D) COwned Following (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

#### Explanation of Responses:

1. The Reporting Person was granted 49,383 shares of restricted stock pursuant to the Issuer's 2013 Stock Incentive Plan, as amended. One-third of the shares will vest on each of January 1, 2026, 2027, and 2028, subject to continued service. The reporting person elected to defer 100% of these restricted shares pursuant to the Issuer's Deferred Compensation Plan for Directors and instead received deferred share units that are subject to the same vesting conditions. Vested shares will be delivered to the Reporting Person in January of the year following the Reporting Person's termination of service, or earlier upon their death or change in control of the Issuer.

 $2.\ Total\ holdings\ include\ 58,047\ shares\ underlying\ deferred\ restricted\ stock\ units.$ 

/s/ Samuel Berry, Attorney-in-Fact 01/03/2025

\*\* Signature of Reporting Person Dat

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.