\Box

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5 |
| 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

| OWR APPR | OVAL |
|-----------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average bur | den |
| hours par response: | 0 5 |

| nours per response: | 0.5 |
|---|-----|
| | |
| tionship of Reporting Person(s) to Issuer | |

| | | Table I - Non-D | erivative Securities Acquired, Disposed of, or Bene | ficially | Owned | |
|------------------------------|---------|-----------------|--|----------|--|---|
| (City) | (State) | (Zip) | | | Person | |
| COLUMBIA | MD | 21046 | | X | Form filed by One Re | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | Line) | ridual or Joint/Group Fili | |
| (Last) 10220-L OLD | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 12/22/2003 | | below) | below) |
| 1. Name and Addr LINK MAX | 1 0 | Person* | 2. Issuer Name and Ticker or Trading Symbol <u>CELSION CORP</u> [CLN] | | tionship of Reporting Pe all applicable) Director Officer (give title | erson(s) to Issuer 10% Owner Other (specify |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 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 | Transaction(s) (Instr. 3 and 4) | | (1150.4) |
| Common Stock | 12/22/2003 | | A | | 41,287 | A | \$0 ⁽¹⁾ | 0 | D | |
| Common Stock | 12/22/2003 | | Р | | 22,938 | A | \$1.09 | 521,411 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | | | (371 | , | , | | , | • • | | | , | | | | |
|---|---|--|---|------------------------------|---|--|---|--|--------------------|--|--|---|--|--|--|
| 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. Transa Code (8) | | 5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5 | ative rities ired osed . 3, 4 | 6. Date Exerc Expiration Da (Month/Day/Y | ate | 7. Title Amour Securi Under Deriva Securi and 4) | nt of ties lying tive ty (Instr. 3 | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. These shares were awarded as annual compensation for serving as a member of the Board of Directors and the Chairman of the Board of Directors.

| 1-1 | Max | \mathbf{D}^{-1} | T : |
|-----|-------|-------------------|-------|
| 15/ | IVIAX | E. | LIIIK |

12/23/2003 Date

** Signature of Reporting Person

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.