Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	20549	
vasilligion,	D.C.	20349	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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hours per response	. 05								

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Beyer Russell P</u>				2. Issuer Name and Ticker or Trading Symbol SAB Biotherapeutics, Inc. [SABS]								(Chec	k all app Direc	licable)	or 10% Ow			
(Last) 2100 E 5	`	irst) (EET NORTH	Middle)			Date of Earliest Transaction (Month/Day/Year) 0/18/2021							X	below	below) below) Chief Financial Officer			
(Street)	FALLS S	D 5	57104		4. If A	ment,	Date o	of Original Filed (Month/Day/Year)					6. Indi Line) X	Form Form	Applicable erson eporting			
(City)	(5	tate) (Zip)			Person												
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Securit		ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership			
						Code	v	Amount	(A) oi (D)	Pr	ice	Transa	ed ction(s) 3 and 4)		(Instr. 4)			
Common	Stock			10/18/2	021(1)				A		2,475	A	\$	\$10.1	2	,475	D	
Common Stock 09/28/202		021(1)				A		149	A	\$	10.08		149	I	By spouse			
Common Stock 10/25/2		2021				A		129	A	\$	57.78	:	278	I	By spouse			
Common Stock 10/26/20			2021				S ⁽²⁾		278	D	;	\$7.9		0	I	By spouse		
Common Stock 09/		09/28/20	2021(1)				A		5	A	\$	\$10.07		5	I	By daughter		
Common Stock 09			09/29/20	9/29/2021(1)				A		10	A	\$	10.08		15	I	By daughter	
		Та									osed of, o				Owne	d		
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date Execution Date, if any (Month/Day/Year) (Month/Day/Year) 4. Transaction Date, if any (Month/Day/Year) (Month/Day/Year)				ction of		6. Date Exerci Expiration Da (Month/Day/Y		ite	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership (Instr. 4)			
1					Code V		(A)	(D)	Date Exercis	able	Expiration Date		Numb of Share					

Explanation of Responses:

- 1. This transaction occurred prior to the business combination pursuant to the Agreement and Plan of Merger, dated June 21, 2021 and as amended August 12, 2021, by and among Big Cypress Acquisition Corp., Big Cypress Merger Sub Inc., and SAB Biotherapeutics, Inc. ("Issuer"). The reporting person's obligation to disclose this transaction occurred upon the consummation of the business combination.
- 2. The sale of Issuer common stock by the reporting person's spouse reported herein was matchable under Section 16(b) of the Securities Exchange Act of 1934, to the extent of 278 shares, with the purchase of 278 shares of Issuer's common stock as also reported herein. The reporting person has paid to Issuer, upon settlement of the sale, \$15.48, representing the full amount of the profit realized in connection with the short-swing transaction.

/s/ Russell Beyer

11/16/2021

** 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.