FORM 4

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

Washington, D.C. 20549

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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| OMB APPROVAL        |        |  |  |  |  |  |  |  |  |
|---------------------|--------|--|--|--|--|--|--|--|--|
| OMB Number: 3235-   |        |  |  |  |  |  |  |  |  |
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| hours per response: | 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 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>Kropotova Alexandra</u>  |  |             |                          |                 | 2. Issuer Name and Ticker or Trading Symbol SAB Biotherapeutics, Inc. [ SABS ] |                       |  |                     |                      | (Che  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify           |                 |  |  |        |  |
|--|--|-------------|--------------------------|-----------------|--|-----------------------|--|---------------------|----------------------|---|---|-----------------|--|--|--------|--|
| (Last) (First) (Middle) 2100 EAST 54TH STREET NORTH  |  |             |                          |                 | 3. Date of Earliest Transaction (Month/Day/Year) 09/13/2022                    |                       |  |                     |                      | X   | below)  | Chief Medical   |  | below)   | Decity |  |
| (Street) SIOUX I   |  | D<br>state) | 57104<br>(Zip)           | 4.              | 4. If Amendment, Date of Original Filed (Month/Day/Year)                       |                       |  |                     |                      | Line)   | Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |                 |  |  |        |  |
|  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned           |             |                          |                 |  |                       |  |                     |                      |   |   |                 |  |  |        |  |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/Date)   |  |             | •                        | Execution Date, |  | Code (Instr.          | Transaction Code (Instr. 3, 4 5)   |                     |                      | 5. Amoun<br>Securities<br>Beneficia<br>Owned Fo<br>Reported | illy  | Form:<br>(D) or | m: Direct<br>or Indirect<br>Instr. 4)                                    | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |        |  |
|  |  |             |                          |                 |  | Code V                | Amount   | (A) or<br>(D)       | Price                | Transacti<br>(Instr. 3 a                                    |   |                 |  |  |        |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |             |                          |                 |  |                       |  |                     |                      |   |   |                 |  |  |        |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | vative Conversion Date Execution Date, Irity or Exercise (Month/Day/Year) if any Code (Ins |             | action Derivative Expire |                 |  | Expiration Da         | Date Exercisable and piration Date onth/Day/Year)  Date Exercisable and Amof Securities Underlying Derivative Sec (Instr. 3 and 4) |                     | ies<br>g<br>Security | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)         | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)                              |                 | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |        |  |
|  |  |             |                          | Code            | v  | (A)                   | (D)  | Date<br>Exercisable | Expiration<br>Date   | Title   | Amount<br>or<br>Number<br>of<br>Shares  |                 | (Instr. 4)   | on(s)  |        |  |
| Employee<br>Stock<br>Option<br>(right to<br>buy)   | \$0.71   | 09/13/2022  |                          | A               |  | 18,325 <sup>(1)</sup> |  | (2)                 | 09/13/2032           | Common<br>Stock   | 18,325  | \$0.00          | 18,32:   | 5  | D      |  |

## **Explanation of Responses:**

- 1. Represents options to purchase shares of common stock pursuant to the Company's 2021 Omnibus Equity Incentive Plan.
- 2. The shares underlying the option vest over a four-year period, vesting 1/4 on the one-year anniversary of the date of grant, and the remaining 3/4 vesting pro rata on a monthly basis in 36 equal installments thereafter

## Remarks:

/s/ Alexandra Kropotova

09/15/2022

\*\* Signature of Reporting Person

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.