FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549			
	. 20549	D.C.	Washington.

STATEMENT	OF CHANG	ES IN BENEI	FICIAL OW	NERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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

Name and Address of Reporting Person* Sullivan Eddie Joe						2. Issuer Name and Ticker or Trading Symbol SAB Biotherapeutics, Inc. [SABS]								all app Direc	licable) tor	ng Pe	rson(s) to Is	vner
(Last) 2100 E 5	(Fi 4TH STRE	rst) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/07/2023								X	below	er (give title v) Chief Exec	utive	Other (s below)	specify
(Street) SIOUX I	FALLS SI		7104										. Indivi ine) X	Form	filed by On	e Rep	ng (Check A porting Person	on
(City)	(St		Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											nded to		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			2. Transac Date (Month/Da	Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acq Disposed Of (D) (5)					ies Formalist Fo		Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) (D)	or Price	Reported Transaction(s) (Instr. 3 and 4)					(Instr. 4)	
Common Stock 12/0			12/07/	2023				P (1)		1,740	A	\$0.	.88	5,2	32,304		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)	if any	med on Date, Day/Year)	4. Transa Code (8)		of Expira		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of		8. Price of Derivative Security (Instr. 5)		Owners Form: Direct (I or Indire (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	Date Expiration of				Number							

Explanation of Responses:

1. Represents 1,740 shares of the Issuer's common stock, par value \$0.0001 per share, acquired by the reporting person in an open market transaction.

/s/ Eddie Joe Sullivan

12/08/2023

** 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.