SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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	OMB Number:	3235-0287								
	Estimated average burden									
	hours per response:	0.5								

Section obligat	this box if no l n 16. Form 4 o ions may cont tion 1(b).		STAT		ed pursuar	t to Section 16(a) tion 30(h) of the In	of the Se	ecuritie	es Exchang	e Act of 19	_	ΗP	Estim	Number ated ave per resp	erage burde	3235-0287 n 0.5
1. Name and Address of Reporting Person* Sullivan Eddie Joe						r Name <b>and</b> Ticke Biotherapeu			ck all applica		ing Person(s) to Iss 10% O					
(Last) 2100 E 5		First) EET NORTH	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/21/2024							give title PRES	Other (sp below)		specify
(Street) SIOUX I	FALLS S	D	57104		4. If Am	endment, Date of	Original I	Filed (	Month/Day	'Year)	6. Inc Line) X		ed by One	Repor	Check App ting Persor One Repor	n
(City)	(;	State)	(Zip) able I - Nor	1-Deriv	Che the	10b5-1(c)	te that a t conditions	ransac of Rul	tion was ma e 10b5-1(c).	de pursuant See Instruc	ion 10.		<sup>-</sup> written pla	an that is	intended to	∍ satisfy
1. Title of S	Security (Ins	urity (Instr. 3) Date (Month/Day/Ye				2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.				of (D) (Instr. 3, 4 and 5) Beneficia Owned F Reported			Form:	nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	v	Amount	(A) or (D)	Price	Transaction(s)				
						curities Acqu lls, warrants,						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Co	nsaction de (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date E Expiratio (Month/E	on Date		7. Title an of Securit Underlyin Derivative (Instr. 3 ar	es J Security	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported	re es ally g d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)

			Code	v	(A)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Employee Stock Option (right to buy)	\$5.17	02/21/2024	А		190,000 <sup>(1)</sup>	(2)	02/21/2034	Common Stock	190,000	\$ <mark>0</mark>	190,000	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.

/s/ Eddie J. Sullivan
** Signature of Reporting Person

02/23/2024 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.