FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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|---|-----------------------|-----------|
| | OMB Number: | 3235-0287 |
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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

| Name and Address of Reporting Person* | | | | | | | 2. Issuer Name and Ticker or Trading Symbol | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---|--|--|--|----------------|---|---|---|--|--------------|--------------------|--|-------------|--------|---|---|----------|--|---|--|--|
| Prante Gerhard | | | | | | | Cibus, Inc. [CBUS] | | | | | | | | | cable) or | | 10% O | vner | | |
| (Last) | (F | rirst) | st) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/30/2024 | | | | | | | | | | Other (sbelow) | - | | |
| C/O CIBUS, INC. 6455 NANCY RIDGE DRIVE | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 06/03/2024 | | | | | | | | Line | 6. Individual or Joint/Group Filing (Check Applicable ine) Form filed by One Reporting Person | | | | | | |
| (Street) SAN DIEGO CA 92121 | | | | | | Form filed by More than One Reporting Person | | | | | | | | | | | | | | | |
| (City) (State) (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. | | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transar Date (Month/Date) | | | | | | | Execution D | | | Code (Instr. | | | | | Benefici Owned I | es Formially (D) (Following (I) (I | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | Code | v | Amount | (A (C |) or) | Price | Reporte Transac (Instr. 3 | tion(s) | | | (Instr. 4) | | | | | |
| Class A C | Common St | 0/202 | /2024 | | | A | | 6,072 ⁽¹⁾ A | | \$0 | 77 | 77,857 | | D | | | | | | | |
| | | 7 | able II - | | | | | | | | osed of | | | | Owned | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | Date, Transact | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | s lly | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | 0 N 0 | lumber | | | | | | | |
| Stock Option (Right-to- Buy) | \$14.82 | 05/30/2024 | | | A | | 4,565 | | 05/30/20 | 24 | 05/30/2034 | Class Commo | on 4 | 4,565 | \$0 | 4,565 | | D | | | |

Explanation of Responses:

1. The Restricted Stock Units vest in full, subject to the Director's continued service, on the earlier of (1) the first anniversary of the grant date and (2) the date of the Company's next annual meeting of the shareholders following the grant date.

> Jason Stokes, Attorney-in-Fact for Gerhard Prante

06/03/2024

** 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.