FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE	S IN BENEFIC	IAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average bur	den									
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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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 ar		Reporting Person*							er or Tradeutics, I			3]			lationship o ck all applic Directo	cable)	Person(s) to	Issuer Owner
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)							V	Officer below)	(give title	Oth	er (specify w)	
	IABS THE K AVENU	RAPEUTICS, IN E	IC.		01	./17/2	2025								SVP,	General Co	ounsel & S	ecry
(Street) NEW Y(10169 (Zip)		4. If Amendment, Date of Origi					jinal Filed (Month/Day/Year)				Line)	Individual or Joint/Group Filing (Check Applicable ne) Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)			ole I - Non	n-Deriv	vativ	e Se	curities	s Ac	quired,	Dis _i	oosed o	f, or Be	enefi	cially	Owned			
Date					2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr. 5)					s Form ally (D) or ollowing (I) (In	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownershi (Instr. 4)				
								Code	v	Amount	(D)		rice	Transact (Instr. 3	ion(s) and 4)		(111511.4)	
Common	Stock	-	Table II - I	Deriva		Sec			uired, D , option			or Ber	efic			500	D	<u> </u>
Derivative Conversion Date Executity Or Exercise (Month/Day/Year) if			3A. Deemed Execution I if any (Month/Day	Date, Transaction Code (Instr			on of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (or Indir (I) (Inst	Benefic Owners oct (Instr. 4	
					Code	v			Date Exercisabl			or Nu of		ount nber ires				
Employee Stock Option (right to buy) ⁽²⁾	\$6.16	01/17/2025			A		42,900		(3)	0	1/17/2035	Common Stock	42,	,900	\$0	42,900	D	

Explanation of Responses:

- 1. Represents restricted stock units ("RSUs") granted to the Reporting Person pursuant to the Issuer's 2018 Equity Incentive Plan. Each RSU represents a contingent right to receive one share of Common Stock on the vesting dates of the RSU. The RSUs vest by 1/3 on each of January 17, 2026, January 17, 2027 and January 17, 2028, subject to the Reporting Person's continued service to the Issuer on each vesting date.
- $2. \ Represents \ stock \ options \ granted \ to \ the \ Reporting \ Person \ pursuant \ to \ the \ Issuer's \ 2018 \ Equity \ Incentive \ Plan.$
- 3. The stock options shall vest and become exercisable as to 25% of the shares subject to the option on January 17, 2026, and thereafter vest and become exercisable as to 1/48th of the shares in equal monthly installments, until such time as the option is 100% vested, subject to the Reporting Person's continued service to the Issuer on each vesting date.

/S/ John Larocca

01/22/2025

** 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.