FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPR	OVAL						
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).

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(0). 31	ee instruction																			
Name and Address of Reporting Person* Prante Gerhard					2. Issuer Name and Ticker or Trading Symbol Cibus, Inc. [CBUS]									(CI	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
															✓ Dire	ctor		10% O	wner	
(Last)	3. Date of Earliest Transaction (Month/Day/Year) 01/08/2025								1	Offic belo	er (give title w)		Other (below)	specify						
6455 NANCY RIDGE DRIVE					1															
		4. If Amendment, Date of Original Filed (Month/Day/Year)									6	6. Individual or Joint/Group Filing (Check Applicable								
(044)					7. " /	4. II Amendment, Date of Original Filed (Month/Day/Year)									Line)					
(Street)	700 0		2121		1										 ✓ Forn	n filed by On	e Rep	orting Pers	on	
SAN DII	EGO CA	A 9	2121		1										 Forn	orm filed by More than One Reporting				
,					1										Pers					
(City)	(St	ate) (2	Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
		Table	I - Nor	n-Deriva	itive S	secu	irities	Acq	uired,	Dis	posed of	, or I	3ene	eticia	ally Owr	ned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution D		Date,	Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				nd Secur Benef		Forn (D) o	Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership		
									П		(A) or Pr				Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
				Code	١٧	Amount	(a)	`	Price											
Class A Common Stock 01/08				01/08/	2025		S		1,150 D)	\$2.	8 46	46,807(1)		D				
		Tol	مام ال	Dorivoti	C.		tion	A 0 0 1 1 i	rod D	lione	and of	or Da	no f	اماما	ly Owns	.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)	Title of 2. rivative Conversion Date Sure or Exercise (Month/Day/Year) Title of 2. 3. Transaction Execution Date, if any				4. 5. Number of Derivativ		vative irities ired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		nstr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V		(A)	(D)			Expiration Date	Title	or	ount nber res						

Explanation of Responses:

 $1. The \ reported \ sale \ occurred \ automatically \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ by \ reporting \ person \ on \ August \ 16, 2024.$

<u>Jason Stokes, Attorney-in-Fact</u> <u>01/10/2025</u> for Gerhard Prante

** 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.