FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB API	PROVAL
OMB Number:	3235-0287
Estimated average	a hurdan

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

Filed i

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287	
	Estimated average bur	den :	
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:	0.5	
or Section 30(h) of the Investment Company Act of 1940			

1(c). See Instruction 10. 1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol Y-mAbs Therapeutics, Inc. [YMAB]							Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Gad Thomas					1-maus Therapeutics, mc. [YMAB]								☑ Director 10% Owner						
(Last)	, , , , , , , , , , , , , , , , , , , ,						3. Date of Earliest Transaction (Month/Day/Year) 03/07/2025							Officer (give title Other (specify below) below) CHIEF BUSINESS OFFICER					
C/O Y-MABS THERAPEUTICS, INC. 202 CARNEGIE CENTER, SUITE 301					03/07/2023								CHILI BOSHNESS OFFICER						
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
PRINCETON NJ 08540													Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	ate) (2	Zip)		Pelson														
			I - N		_			-	red, D	isposed of	-		1						
Date			2. Transactio Date (Month/Day/Y	Exe		2A. Deemed Execution Date, f any Month/Day/Year)		Transaction Disposed Of (D Code (Instr. 5)		Acquired (A) or (D) (Instr. 3, 4 and		Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	e v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(In		Instr. 4)		
Common	Stock			03/07/202	25			S		10,810(1)	D	\$5.23(2)	202,	,721		D			
Common Stock												67,	681		I :	By GAD Enterprises LLC ⁽³⁾			
Common Stock													60,	60,000 I			By Children ⁽⁴⁾		
		Та	ble II							posed of, convertib				d		'			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year) Exe	Exec if any	Deemed cution Date, y tth/Day/Year)		4. 5. Number of Orde (Instr. Derivativ		6. Date Exerci Expiration Da (Month/Day/Yours)		ercisable and Date 7. Title and Amount of		nt of ities lying itive ity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership tt (Instr. 4)		
					Code	v	(A) (D	Da	ate ercisable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. Nondiscretionary sale to cover tax liability associated with the vesting and settlement of restricted stock units.
- 2. This transaction was executed in multiple trades at prices ranging from \$5.15 to \$5.27, inclusive. The price reported reflects the weighted average sale price. The Reporting Person hereby undertakes to provide upon request to the SEC staff, the Issuer or a security holder of the Issuer full information regarding the number of shares and prices at which the transaction was effected
- 3. Reporting Person is sole member of GAD Enterprises, LLC and the sole member and manager of GAD Management, LLC, the manager of GAD Enterprises, LLC, and as such Reporting Person has sole voting and dispositive power with respect to such shares.
- 4. Represents shares owned by Reporting Person's children who are deemed to share Reporting Person's household.

/s/ John LaRocca, Attorney-in-03/11/2025 **Fact**

** Signature of Reporting Person

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.