## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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OMB APP	ROVAL
OMB Number:	3235-0287
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0.5

hours per response:

Check this box if no	longer subject to
Section 16. Form 4 c	or Form 5
obligations may cont	inue. See
Instruction 1(h)	

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Gad Thomas					2. Issuer Name and Ticker or Trading Symbol Y-mAbs Therapeutics, Inc. [ YMAB ]							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)   Director 10% Owner					
(Last) (First) (Middle) C/O Y-MABS THERAPEUTICS, INC. 230 PARK AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 09/19/2024								Officer (give title Other (specify below) below)  CHIEF BUSINESS OFFICER					
(Street)  NEW Y(		Y tate)	4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person														
		Tab	ole I - N	on-Deri	vativ	e Sec	curit	ies Ac	quirec	d, Di	sposed o	f, or Be	neficiall	ly Owned				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)					Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at 5)		(A) or 3, 4 and	nnd Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Reported Transactio (Instr. 3 an				Instr. 4)
Common Stock 09/19/2					/2024				M		22,831(1)	A	\$4.38	181,5	31	I	D	
Common Stock														67,6	81		I   1	By GAD Enterprises LLC <sup>(2)</sup>
Common Stock														60,000		I By		By Children <sup>(3)</sup>
		-	Table II								posed of, convertil			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Executio if any (Month/D	ned	4. Transa	ransaction ode (Instr.		5. Number of		6. Date Exercisal Expiration Date (Month/Day/Year		7. Title and Amo		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. 4	Beneficia Ownersh t (Instr. 4)
						v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (right to buy)	\$4.38	09/19/2024			М			22,831	(4)		10/21/2026	Common Stock	22,831	\$0	143,169		D	

## Explanation of Responses:

- 1. Represents shares acquired through the exercise of Employee Stock Options.
- 2. 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.
- 3. Represents shares owned by Reporting Person's children who are deemed to share Reporting Person's household.
- 4. The option is fully vested and exercisable.

/s/ John LaRocca, Attorney-in-**Fact** 

09/20/2024

\*\* 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.