

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)							
1. Name and Address of Reporting Person [*] – Oliveira Steven Michael	2. Date of Event Req Statement (Month/Da 04/12/2021		3. Issuer Name and Ticker or Trading Symbol Benitec Biopharma Inc. [BNTC]				
(Last) (First) (Middle) 225 VIA PALACIO	04/12/2021		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) PALM BEACH GARDENS, FL 33418			(Check Director Officer (give tit below)	all applicable) e <u></u> Other (specify below)		6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City) (State) (Zip)	Table I - Non-Derivative Securities Beneficially Owned						
(City) (State) (Zip)		Table I -	- Non-Derivat	tive Securities	Benefi	cially Owned	
1. Title of Security (Instr. 4)	Be	Table I - Amount of Sec eneficially Own nstr. 4)	urities	3. Ownership	1	e of Indirect Beneficial Ownership	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	and Expiration Date (Month/Day/Year)		on Date Securities Underlying Derivative Security		4. Conversion	5. Ownership	6. Nature of Indirect Beneficial		
(Instr. 4)					or Exercise	Form of	Ownership		
					Price of	Derivative	(Instr. 5)		
					Derivative	Security: Direct			
	Date	Expiration			Security	(D) or Indirect			
	Exercisable	Date	Title	Amount or Number of Shares		(I)			
	Literensuore	Duit		Snares		(Instr. 5)			

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Oliveira Steven Michael 225 VIA PALACIO PALM BEACH GARDENS, FL 33418		Х			

Signatures

/s/ Steven Michael Oliveira	12/09/2021	
**Signature of Reporting Person	Date	

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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.

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