FORM 4

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

OMB APPROVAL
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).

STATEMENT OF CHANGES IN 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 Reportin Oliveira Steven Michael | 2. Issuer Na Benitec Bi | | | _ | Symbo | 1 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner | | | | |
| (Last) (First) 225 VIA PALACIO | 3. Date of Ea 04/28/2021 | | actio | n (Month/D | ay/Ye | ar) | Officer (give title below) | | | | |
| (Street) | 4. If Amendn | nent, Date (| Origi | nal Filed(Mo | nth/Day | /Year) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| PALM BEACH GARDEN | S, FL 33418 | | | | | | | Form filed by More than One Reporting Person | | | |
| (City) (State) | Table I - | able I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code | de (Instr. 3, 4 and 5) (str. 8) | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect | Beneficial Ownership | | | |
| | | | Code | V | Amount | (A) or (D) | Price | (Ilisti: 3 aliu 4) | (I) (Instr. 4) | (111511.4) | |
| Common Stock, par value \$0,0001 per share | 04/28/2021 | | Р | | 100,000 | A | \$ 5.4486 | 768,123 | I | Through Nemean Asset Management, LLC | |
| Common Stock, par value \$0,0001 per share | 04/29/2021 | | P | | 22,877 A | | \$ 5.491 | 791,000 | I | Through Nemean Asset Management, LLC | |
| Common Stock, par value \$0,0001 per share | | | P | | 120,000 | A | \$ 4.1824 | 911,000 | I | Through Nemean Asset Management, LLC | |
| Common Stock, par value \$0,0001 per share | 05/03/2021 | | P | | 40,500 | A | \$ 4.2537 | 951,500 | I | Through Nemean Asset Management, LLC | |
| Common Stock, par value \$0,0001 per share | 11/29/2021 | | P | | 37,947 | A | \$ 3.1804 | 989,447 | I | Through Nemean Asset Management, LLC | |
| Common Stock, par value \$0,0001 per share | 12/09/2021 | | P | | 10,553 | A | \$ 3.0443 | 1,000,000 | I | Through Nemean Asset Management, LLC | |
| Reminder: Report on a separate li | ne for each class of | securities beneficial | lly owned d | | Persons v | vho ro I in th | is form a | o the collection of informa re not required to respon rently valid OMB control r | d unless | SEC 1474 (9-02) | |

| I | Security Instr. 3) | Conversion | Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code | | 5. Numl of Deriv Secur Acqu (A) of Dispo of (D (Instr 4, and | rative rities ired rosed) . 3, | | | Amount of Underlying | | Derivative Security (Instr. 5) | Securities Beneficially Owned Following Reported Transaction(s) | Ownership Form of Derivative Security: Direct (D) or Indirect | Beneficial Ownership (Instr. 4) |
|---|-----------------------|------------|--------------------------|---|------|---|--|---------------------------------|---------------------|--------------------|-------------------------|--|--------------------------------------|--|--|---------------------------------------|
| | | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Reporting Owners

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

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 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.