FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPI	ROVAL
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-

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(c). Se	ee Instruction 1	0.																	
		Reporting Person*							er or Tra		Symbol TCRT	1		(Chec	ationship k all app		ng Pe	rson(s) to Is	suer
<u>Vieser Jaime</u>												<b>V</b>	Direc	tor		10% Ov	vner		
(Last)	(Fi	/	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/31/2024							Office below	er (give title v)		Other (s below)	specify			
C/O ALA	AUNOS TE	IERAPEUTICS,	, INC.																
2617 BISSONNET ST, SUITE 225				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street)														Line)	Form	filed by On	o Don	orting Perso	<b></b>
HOUST	ON TX	ζ 7	70005											V		filed by Mo		in One Repo	
(City)	(St	ate) (Z	Zip)																
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficially	/ Own	ed			
Date			th/Day/Year) Exer if an (Mor		2A. Deemed Execution Date, if any (Month/Day/Year)				Disposed (	ies Acquired (A Of (D) (Instr. 3,			Securit Benefic Owned	Amount of curities neficially vned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)	or F	rice	Transa	Reported Transaction(s) (Instr. 3 and 4)			(111301. 4)	
Common Stock 12							12/31/	S		2,182	D	)	\$2.01	20	6,712		D		
Common Stock		12/31/	/2024 12/31/2024		024	S		818 D		\$2	25,894			D					
		Tal									osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		of		6. Date Exercis Expiration Dat (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)
					Code	v	V (A) (D)		Date Exercisa	able	Expiration Date	Title	Amo or Num of Shar	ber					

**Explanation of Responses:** 

/s/ Melinda Lackey, Attorney-01/03/2025 in-Fact

\*\* 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.