## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasnington,	D.C.	20049

STATEMENT	OF CHAN	IGES IN BEN	IEFICIAL OV	VNERSHIP

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).

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

	nd Address of	Reporting Person*							er or Tradi eutics,			c ]			ck all applica	able)	g Perso	on(s) to Issu	
(Last)	,	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/02/2024							Officer ( below)	give title		Other (s below)	pecify		
		HERAPEUTIC HARD ROAD	S, INC.		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person							
(Street)	ERSBURG	MD	20878										Form file Person	One Report	orting				
(City)	(S	tate)	(Zip)			Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.							satisfy						
		Та	ble I - Non	ı-Der	ivativ	ve Se	curitie	s Ac	quired, l	Disp	osed c	of, or E	ene	ficially	Owned				
1. Title of Security (Instr. 3)  2. Trans Date (Month/				2A. Deemed Execution Date if any (Month/Day/Yea		e, Transaction Dispose Code (Instr.		rities Acquired (A) or ed Of (D) (Instr. 3, 4 and		(A) or 3, 4 and 5	5. Amoun Securities Beneficia Owned Fo	Form (D) or		: Direct I r Indirect E str. 4)	. Nature of ndirect seneficial ownership nstr. 4)				
									Code	v	Amount	(A (D	) or )	Price	Transacti (Instr. 3 a	ion(s)			
Common	Stock			01/	/02/20	2/2024		<b>A</b> <sup>(1)</sup>		178,000 A		A	\$ <mark>0</mark>	428,013		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		3A. Deemed Execution Da if any (Month/Day/Y	ate, Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Or No	mount r umber shares		(Instr. 4)	on(s)			
Stock Option (Right to Buy)	\$0.6552	01/02/2024			A		228,000		(2)	0:	1/01/2034	Commo Stock		28,000	\$0	228,00	00	D	

## Explanation of Responses:

- 1. Each Restricted Stock Unit represents a contingent right to receive one share of common stock, which will vest in three equal annual installments so that the underlying shares will be fully vested on January 2, 2027.
- 2. This award will vest in 36 equal monthly installments, so that it shall be fully vested on January 2, 2027.

## Remarks:

/s/ Matthew Bartholomae, Attorney-in-Fact for Timothy C. 01/04/2024 Barabe

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.