FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person* Daniel Thomas O			2	2. Issuer Name and Ticker or Trading Symbol Gossamer Bio, Inc. [GOSS]				(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) U Director 10% Owner						
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/06/2024						Officer (below)	give title	Other (s below)	pecify	
3013 SCIENCE PARK ROAD				4	4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Ind Line)	Individual or Joint/Group Filing (Check Applicable Line)				
(Street) SAN DII	EGO C	A	92121								V	_	ed by One Rep ed by More tha	•	
(City)	(S	State)	(Zip)		Rule 10b5-1(c) Transaction Indication										
					Che the	eck this box to affirmative de	indica fense	ate that a trans conditions of R	action was ma tule 10b5-1(c)	ide pursuant . See Instruc	to a contract tion 10.	, instruction o	r written plan tha	t is intended to	satisfy
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)			5. Amount Securities Beneficial Owned Fo Reported	For (D)	: Direct In r Indirect B str. 4) C	7. Nature of ndirect Beneficial Ownership		
				Code V			Amount	(A) or (D)	Price	Transactio (Instr. 3 ar			Instr. 4)		
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	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)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Non- qualified stock option (Right to Buy)	\$0.6	06/06/2024		A		115,000 ⁽¹⁾		(2)	06/05/2034	Common Stock	115,000	\$0	115,000	D	

- 1. Award made pursuant to Non-Employee Director Compensation Program.
- 2. The entire number of shares subject to this option becomes fully vested and exercisable on the first to occur of (a) the first anniversary of the grant date or (b) the next occurring annual meeting of the Issuer's stockholders, subject to the Reporting Person's continued service on the board of directors of the Issuer through such vesting date.

Remarks:

/s/ Jeff Boerneke, Attorney-in-

Fact

** Signature of Reporting Person

Date

06/06/2024

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.