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	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
obligations may continue. See Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

							ION 30(II)		: 111	ivestment	COI	npany Act	01 194	-0						
1. Name and Address of Reporting Person [*] Peterson Caryn					2. Issuer Name and Ticker or Trading Symbol <u>Gossamer Bio, Inc.</u> [GOSS]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(1 1)	/-	20	(1.4)			3. Date of Earliest Transaction (Month/Day/Year)							X	below)	Officer (give title below)		Other (s below)	becity		
(Last)		First)	(Middle)		11	11/20/2023							EV	VP, Regulatory Affairs						
3013 SCIENCE PARK ROAD				F	4. If Amendment, Date of Original Filed (Month/Day/Year)									6 100	6. Individual or Joint/Group Filing (Check Applicable					
					- 4.	II AIII	enument, i	Jale		Unginal F	lieu	(wonun/Da	iy/real)	Line)		onvGroup	Filing	(Check Appl	ICable
(Street)															3	Form fil	ed by One	e Repo	rting Person	
SAN DI	EGO C	A	92121											Form filed by More than One Reporting Person						
(City)	City) (State) (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 satisf the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												satisfy							
		Та	ble I - Non	Dari	i. atis					uired C		nood a		Ban	oficially	Owned				
									q	· ·	JIS	1	,							
1. Title of Security (Instr. 3) 2. Transa Date (Month/E					action 2A. Deeme Execution Day/Year) if any (Month/Da		Date,		Transaction Dispose Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 ar		d (A) or r. 3, 4 and 5	Beneficia Owned Fo	s Form ally (D) o ollowing (I) (In		Direct Indirect Estr. 4)	7. Nature of ndirect Beneficial Ownership		
									Code	v	Amount	((A) or (D)	Price	Reported Transaction (Instr. 3 and	ion(s)			Instr. 4)	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
4 7:410 06		3. Transaction				, ear	, 		ŕ	•	,				,	8. Price of	0 Number		10	11. Nature
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	ate, T	4. Transaction Code (Instr. 8)		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(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)		ate xercisable		expiration Date	Title		Amount or Number of Shares		(Instr. 4)			
Stock Option (Right to Buy)	\$0.838	11/20/2023			Α		125,000			(1)	1	1/19/2033	Comr Stoc		125,000	\$ 0	125,0	00	D	

Explanation of Responses:

1. 25% of the total number of shares subject to the option will vest on November 20, 2024 and 1/48th of the total number of shares subject to the option vest on the last day of each one-month period thereafter, subject to the Reporting Person's continuous service to the Issuer on each such vesting date.

Remarks:

/s/ Jeff Boerneke, Attorney-in-Fact

11/22/2023

** 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.