FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
vasimigton,	D.C.	20040	

STATEMENT	OF CHANGE	S IN BENEFICIAL	_ OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burden								
l	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* Sidhu Someit				2. Issuer Name and Ticker or Trading Symbol Zura Bio Ltd [ZURA]						(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u> </u>	JOHICH											X			X		
(Last)	(F	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/18/2023					X	below)	-		Other (sp below)	ecify		
C/O MAPLES FIDUCIARY SERVICES			"	03/10/2023					Ch	Officer							
(DELAV	VARE)			 	4. If Amendment, Date of Original Filed (Month/Day/Year)				6 Inc	6. Individual or Joint/Group Filing (Check Applicable							
INC., 4001 KENNETT PIKE, SUITE 302			4.	4. If Americanient, Date of Original Filed (Month/Day/Year)					Line)								
	0111211112	,	2002							X	X Form filed by One Reporting Person						
(Street)	NGTON E	NE	19807										Form file Person	ed by More	e than	One Reporti	ng
VVILIVIII	NGTON L	15	13007		Dula 10hE 1(a) Transaction Indication												
(a): \			/: \	^	Rule 10b5-1(c) Transaction Indication												
(City)	(\$	State)	(Zip)	lг	Ch	eck this box	to indi	cate that a trar	saction	n was m	ade pursua	ent to a contract	, instruction o	r written pla	an that i	s intended to	satisfy
					the	affirmative d	lefens	e conditions of	Rule 10	.0b5-1(c	c). See Insti	ruction 10.					·
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date			Transactio	Day/Year) Execution Date, Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)			5. Amount of				7. Nature of						
			ate Ionth/Day/`			Date				nstr. 3, 4 and	1 and Securities Beneficial				ndirect Beneficial		
				(Month/Day/Yea		ar) 8)				Owned Following (I		(I) (Ins		Ownership (Instr. 4)			
							Code	v A	Amount	(A) (D)		Transactio	ion(s)				
			Table II - De	rivative	- Sa	curities	Δα	uired Dis	nnse	ed of	or Ber	eficially C	wned		,	<u> </u>	
								s, options	•		,	,	wiicu				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Train Security or Exercise (Month/Day/Year) if any Control		Transac Code (II			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)		Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	le V (A)		(D)	Date Exercisable	Expira Date	ation	Title	Amount or Number of Shares		(Instr. 4)	(0)		
Employee Share Option (Right to Buy)	\$0.01 ⁽¹⁾	05/18/2023		A		1,950,000		(2)	05/18/	3/2033	Class A Ordinary Shares	1,950,000	\$0	1,950,0	000	D	

Explanation of Responses:

- 1. The Employee Share Option is a nil cost option granted under the Issuer's 2023 Equity Incentive Plan and the applicable UK Subplan.
- 2. 25% of the option shall become exercisable on May 18, 2024 and a further 2.083% of it shall become exercisable at the end of each month thereafter.

/s/ Someit Sidhu

05/22/2023

** 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.