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									
h	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

1. Name and Address of Reporting Person* <u>Badial Verender S.</u>				2. Issuer Name and Ticker or Trading Symbol Zura Bio Ltd [ZURA]								(Chec	k all application	able)	g Perso	on(s) to Issu	ner	
(Last)	(F RA BIO LT	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/18/2024							V	Officer (give title below) Chief Fin		ncial	Other (sp below) Officer	pecify
1489 WEST WARM SPRINGS ROAD, #110				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person						
(Street) HENDE	RSON N	IV	89014										V		led by Mor		rting Person One Report	
(City)	(5	State)	(Zip)		R	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.										o satisfy		
		Та	ble I - Nor	n-Deri	ivativ	∕e Se	curities	Acc	quired, D	isposed	of, or B	enefici	ally	Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D.					- 1	2A. Deemed Execution Date, if any (Month/Day/Year		3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3)			ired (A) or nstr. 3, 4 a	4 and 5) Securit		s lly ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct Indirect Estr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code V	Amou	nt (A)	or Pric	e	Transaction (Instr. 3 and	ion(s)				
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)	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)		of Secu Underly Derivati	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		3. 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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisable	Expiratio Date	n Title	Amour or Numbe of Shar	er		(Instr. 4)	on(s)		
Employee Share Option (Right to Buy)	\$3.38	06/18/2024			A		420,000		(1)	06/18/203	Class A Ordinary Shares		000	\$0	420,00	00	D	

Explanation of Responses:

1. One fourth (1/4th) of the shares subject to the option award shall vest on June 18, 2025, and one twelfth (1/12th) of the remaining shares subject to the option award shall vest in equal quarterly installments thereafter, subject to the Reporting Person's continuous service through such vesting date.

/s/ Verender Badial

06/21/2024

** 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.