FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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n, D.C. 20549	
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Wu Charles C					2. Issuer Name and Ticker or Trading Symbol GYRE THERAPEUTICS, INC. [GYRE]							5. Re (Chec	k all applica	Reporting Person(s) to Issuer ole) 10% Owner			
(Last) (First) (Middle) C/O GYRE THERAPEUTICS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 11/20/2023					X	below)			below)	′ I		
12770 HIGH BLUFF DRIVE, SUITE 150				4	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Ind Line)	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAN DII	treet) AN DIEGO CA 92130										X	Form filed by One Reporting Person Form filed by More than One Reporting Person				ng	
(City)	(\$	state)	(Zip)	F	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.												
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date				2. Transact Date Month/Day	Execution Date		te, Transaction Disposed Code (Instr.		ies Acquired (A) or Of (D) (Instr. 3, 4 and 5		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		. Nature of ndirect eneficial wnership nstr. 4)		
						Cod	e v	/ Amount	(A) or (D)	Price	Transactio	saction(s)			11541. 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	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)		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)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Stock Option (Right to Buy)	\$0.75 ⁽¹⁾	11/20/2023		A		170,417		(1)(2)		10/31/2030 ⁽¹⁾	Common Stock	170,417	\$0	170,41	17	D	

Explanation of Responses:

1. Beijing Continent Pharmaceuticals Co., Ltd, a company organized under the laws of the People's Republic of China ("Beijing Continent"), terminated its 2021 Stock Incentive Plan (the "2021 Plan") and each option (a "BC Option") to purchase common shares of Beijing Continent outstanding under the 2021 Plan was terminated and replaced with options granted pursuant to a sub-plan for Chinese participants under the Issuer's 2023 Omnibus Incentive Plan that are substantially similar in all material respects to the BC Options previously outstanding under the 2021 Plan.

2. These options are vested in full.

/s/ Ruoyu Chen, as attorney-in-11/22/2023 fact for Charles C. Wu ** 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.