| SEC Form 4 | | | | | | | | | | | | | | | | |
|--|--|---------|---|--|--------------------------------|---------|---|---------------------|--|--|--|--|--|--|--|--|
| FORM 4 | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APP | | | | | | | | | | | APPRO | VAL | | | |
| Section 16. Form 4 or Form 5 obligations may continue. See | | | | AT OF CHANGES IN BENEFICIAL OWNE d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | Estim | OMB Number: 3235-0287 Estimated average burden hours per response: 0.5 | | | |
| 1. Name and Address of Reporting Person [*] Gallagher Neil | | | 2. Issuer Name and Ticker or Trading Symbol Zymeworks Inc. [ZYME] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
| (Last) (First) | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/02/2024 | | | | | | | Officer below) | (give title | | Other (below) | specify | |
| C/O ZYMEWORKS INC. 108 PATRIOT DRIVE, SUITE A | | | 4. If Ame | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line |) | | nt/Group Filing (Check Applicable d by One Reporting Person | | | |
| (Street) MIDDLETOWN DE 19709 | | | | Form filed Person | | | | | | | | | d by More than One Reporting | | | |
| (City) (State) | (Zip) | | Chec | 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. | | | | | | | | | | | | |
| Т | able I - No | n-Deriv | ative Se | curities Ac | quired | l, Dis | posed c | of, o | r Ben | eficially | y Owned | | | | | |
| Dat | | | Day/Year) | 2A. Deemed Execution Date if any (Month/Day/Yea | Code (Instr. | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | 4 and Securities Beneficial Owned Fo Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | V | Amount | | (A) or (D) | Price | | Transaction(s) (Instr. 3 and 4) | | | | |
| | | | | urities Acq s, warrants | | | | | | | Owned | | | | | |
| 1. Title of Derivative (Instr. 3) 2. 3. Transaction Date (Conversion Or Exercise Price of Derivative Security 0 1 0 0 <td>3A. Deeme Execution if any (Month/Day</td> <td>Date,</td> <td>4. Transaction Code (Instr. 8)</td> <td>5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)</td> <td>6. Date Expirati (Month/</td> <td>on Date</td> <td></td> <td>of S Und Deri</td> <td>Title and A Securities derlying ivative S str. 3 and</td> <td>s ecurity</td> <td>8. Price of Derivative Security (Instr. 5)</td> <td>9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)</td> <td>e (s lly g</td> <td>10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</td> <td>11. Nature of Indirect Beneficial Ownership (Instr. 4)</td> | 3A. Deeme Execution if any (Month/Day | Date, | 4. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 6. Date Expirati (Month/ | on Date | | of S Und Deri | Title and A Securities derlying ivative S str. 3 and | s ecurity | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e (s lly g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Stock Option (Right to Buy) Explanation of Responses:

\$9.23

1. Stock options vest in 36 equal monthly installments starting one month after grant date of April 2, 2024.

/s/ Daniel Dex, Attorney-in-Fact

Amount or Number

Shares

74,000

\$0.00

of

Title

Common

Stock

Expiration Date

04/01/2034

Date

(D)

Exercisable

(1)

04/02/2024

74,000

D

** 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).

04/02/2024

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code ۷

Α

(A)

74,000

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.