SEC Form 4	
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(City)

# FORM 4

(State)

(Zip)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

			wasnington, D.C. 20549		OMB APP	ROVAL
to Section	box if no longer subje 16. Form 4 or Form 5	ct STATEMI	ENT OF CHANGES IN BENEFICIAL OW	OMB Number: 3235-0287 Estimated average burden		
obligations Instruction	may continue. <i>See</i> 1(b).	F	led pursuant to Section 16(a) of the Securities Exchange Act of 19 or Section 30(h) of the Investment Company Act of 1940	934	hours per response	: 0.5
1. Name and A <u>Yan Ming</u>	ddress of Reporting	Person*	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Cytek Biosciences, Inc.</u> [ CTKB ]	5. Relationship of (Check all applicat X Director	,	to Issuer % Owner
(Last) C/O CYTER	(First) K BIOSCIENCE	(Middle) 5, INC.	3. Date of Earliest Transaction (Month/Day/Year) 04/19/2023	X Officer (g below) Chief		ner (specify low) <mark>cer</mark>
47215 LAK	EVIEW BOULE	VARD	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line)	nt/Group Filing (Che d by One Reporting I	
(Street) FREMONT	CA	94538			d by More than One	

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.

Person

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Securities Beneficially	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)		(1130.4)
Common Stock	04/19/2023		<b>S</b> <sup>(1)</sup>		20,000	D	<b>\$9.71</b> <sup>(2)</sup>	7,886,053	D	

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			( 0 / 1					•				·						
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)	4. Transa Code ( 8)		of Deriv Secu Acqu (A) of Dispo of (D) (Instr	5. Number of Expiration Date (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of Expirat Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		of Expiration Date (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		Amount of		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares							

### Explanation of Responses:

1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on November 17, 2022.

X

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$9.60 to \$9.89, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range

## Remarks:

/s/ Valerie Barnett, Attorneyin-Fact for Ming Yan

04/20/2023

\*\* 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.