FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	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).

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* Jeanmonod Patrik					2. Issuer Name and Ticker or Trading Symbol Cytek Biosciences, Inc. [CTKB]										k all app Direc	olicable) tor	ng Person(s) to)wner
(Last)	(Fii	rst) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 07/24/2023								X	Officer (give title below) Chief Fina		Other (sp below) ncial Officer		specify	
47215 LAKEVIEW BOULEVARD						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) FREMONT CA 94538														X	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	Rule 10b5-1(c) Transaction Indication																		
						X 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.										tended			
		Table	I - No	n-Derivat	tive S	ecur	ities	Acc	uired,	Dis	posed of	, or E	Benefi	ciall	y Owr	ned			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					te Execution onth/Day/Year) if any		ition D								5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) (D)	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)				
Common Stock 07/24/20						023			S ⁽¹⁾		3,000	A	\$9.	.17 ⁽²⁾		01,768		D	
	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)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		5. Numl of Deriv Secu Acqu (A) o Dispo of (D) (Instr	rative rities iired r osed)	6. Date Expirati	on Da			int of ities rlying ative ity	8. Price Derivati Securiti (Instr. 5		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersl Form: y Direct (Dor Indire (I) (Instr.	Ownership	Beneficial Ownership tt (Instr. 4)		
					Code V		(A)	(D)	Date Exercisable		Expiration Date	Title	Amoun or Numbe of Shares	r					

Explanation of Responses:

- $1. \ The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on March 13, 2023.$
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$8.95 to \$9.27, 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 Patrik Jeanmonod

07/25/2023

** 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.