| SEC Foi | rm 4 | | | | | | | | | | | | | | | | | | | |
|--|---|--|--|---|---|---|---|--|---|-----|---------------|--|-------------------------------------|---|--|---|--|--|--------|--|
| FORM 4 UNITE | | | | NITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | | | | | OMB APPROVAL | | | |
| Section 16. Form 4 or Form 5 obligations may continue. See | | | | | NT OF CHANGES IN BENEFICIAL OWNERSH d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | | OMB Number: 3235-0287 Estimated average burden hours per response: 0.5 | | | | |
| 1. Name and Address of Reporting Person* <u>Naschitz Anat</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>89bio, Inc.</u> [ETNB] | | | | | | | | | (Ch | Relationship (eck all applic X Directo | cable) r | ng Pers X | 10% Ow | ner | |
| (Last) (First) (Middle) C/O 89BIO, INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/15/2021 | | | | | | | | | 1 | Officer below) | (give title | | Other (s below) | pecity | |
| 142 SANSOME STREET, 2ND FLOOR | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) SAN FRANC | 94104 | | | | | | | | | | Line | Ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | | | | | |
| | | Tab | ole I - Non | -Deriva | tive | Sec | curities | s Ac | quired, | Dis | posed o | f, or | Bene | ficial | ly Owned | | | | | |
| Date | | | | 2. Transac Date (Month/Da | |) E) if | A. Deemed xecution Date, any Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | | | | Beneficia Owned F | s ally ollowing | Form (D) of | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code | v | Amount | | (A) or (D) | Price | Reported Transact (Instr. 3 a | ion(s) | | | (Instr. 4) | | | |
| | | - | Table II - I (| | | | | | uired, D s, option | | | | | | Owned | | <u>.</u> | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution D if any (Month/Day) | cution Date, Tra | | ion of Berivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | or | | ecurity 4) mount | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivativ Securitie Beneficia Owned Following Reported Transacti (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

\$24.16

1. This option represents a right to purchase a total of 12,500 shares of the Issuer's Common Stock, one third of which will vest on April 15, 2022, with the remaining two thirds vesting in equal monthly installments over the following two years, subject to the Reporting Person's continued service to the Issuer through each vesting date.

12,500

2. These securities are held of record by Anat Naschitz ("Naschitz"), an employee of OrbiMed Advisors Israel II Limited ("Israel II Limited"). Pursuant to an agreement between Israel II Limited, OrbiMed Israel GP II, L.P. ("Israel II GP"), OrbiMed Advisors LLC ("OrbiMed Advisors"), and OrbiMed Capital GP VI LLC ("GP VI"), Naschitz is obligated to transfer these securities, or the economic benefit thereof, to Israel II Limited, II and II GP, OrbiMed Advisors, and GP VI, which will in turn ensure that such securities or economic benefits are provided to OrbiMed Private Investments VI, LP and OrbiMed Israel Partners II. L.P.

(1)

04/15/2031

Comm

Stock

Remarks:

Stock Option (Right to

Buy)

/s/ Ryan A. Murr, as attorney-04/19/2021 in-fact for Anat Naschitz

** Signature of Reporting Person

12,500

\$0.00

12,500

See

footnote⁽²⁾

I

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).

04/15/2021

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

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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.