SEC For	m 4																		
	FORM	4	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549													OMB APPROVAL			
Check Section obligat Instruct	STATEMENT OF CHANGES IN BENEFICIAL OWNER Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940											Estimated average burden							
1. Name and Address of Reporting Person* MOEBIUS HANS						2. Issuer Name <b>and</b> Ticker or Trading Symbol Athira Pharma, Inc. [ ATHA ]								eck all applic Director	able)	, 10% O		ner	
(Last) (First) (Middle) C/O ATHIRA PHARMA, INC. 18706 NORTH CREEK PARKWAY, SUITE 10				04		3. Date of Earliest Transaction (Month/Day/Year) 01/18/2022									below) below) Chief Medical Officer				
(Street) BOTHELL WA 98011					4.										p Filing (Check Applicable e Reporting Person re than One Reporting				
(City)	(5	State)	(Zip)	n Dor	iveti		oouritio		auirod	Di	opood	of or Do	noficial	v Owned					
Table I - Non-Deriv       1. Title of Security (Instr. 3)       2. Transac       Date       (Month/Date)				sactior	n i ear) i	2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A)		d (A) or	5. Amour	s For Ily (D) ollowing (I) (I		: Direct I r Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	ce Transaction (Instr. 3 and					
Common Stock <sup>(1)</sup> 11/18/2					8/2021	J21 <sup>(2)</sup>		Α	v	829	Α	\$12.51	<sup>3)</sup> 31,256			D			
			Table II ·								posed of converti			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E Expiratic (Month/E	on Da		7. Title and of Securit Underlyin Derivative (Instr. 3 ar	ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	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)	\$10.64	01/18/2022			A		180,000		(4)		01/17/2032	Common Stock	180,000	\$0.00	180,00	00	D		

## Explanation of Responses:

1. The reporting person is voluntarily reporting the acquisition of shares of the issuer's common stock pursuant to the Athira Pharma, Inc. 2020 Employee Stock Purchase Plan ("ESPP"), for the ESPP Purchase Period (as defined in the ESPP) of May 18, 2021 through November 18, 2021. This transaction is also exempt under Rule 16b-3(c).

2. The Purchase Period ended November 18, 2021 and is the Purchase Period comprising the Offering Period (as defined in the ESPP) that began May 18, 2021.

3. In accordance with the ESPP, these shares were purchased based on 85% of the closing price on November 18, 2021.

4. One forty-eighth (1/48th) of the shares subject to the option will vest on February 18, 2022, and one forty-eighth of the shares subject to the option will vest each month thereafter.

## **Remarks:**

## /s/ Glenna Mileson, Attorney-01/20/2022

in-fact for Hans Moebius
\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $\ast$  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.