SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION Washington, D.C. 20549

OMB APPROVAL

3235-

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and A JOHNSO	0	2. Date of Event Requiring Statement (Month/Day/Year) 09/17/2020 3. Issuer Name and Ticker or Trading Symbol Athira Pharma, Inc. [ATHA]									
	(First) A PHARMA DN ROAD, SI WA (State)				4. Relationship of Repu Issuer (Check all applicable) X Director Officer (give title below)	, (rson(s) 10% Ov Other (s below)	wner	File 6. Ir	d (Month/Day/ adividual or Joi eck Applicable Form filed to Person	int/Group Filing Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. I) (D) or Indi (I) (Instr. 5		irect direct	ct Ownership (Instr. 5) rect			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
Ex. (. Date Exercisable and Expiration Date Month/Day/Year)		3. Title and Amount of Secu Underlying Derivative Secu (Instr. 4)		urity Conv or Ex		cise	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr.
			Date Exercisable	Expiration Date	Title	or Nui of	nount mber ares	Price of Derivat Securit	ive	or Indirect (I) (Instr. 5)	5)
Stock Option (Right to Buy) ⁽¹⁾		(2)	09/16/2030	Common Stock	27	,742	17		D		

Explanation of Responses:

1. Reflects a 7.9302-for-1 reverse stock split of the outstanding shares of the Issuer effected September 11, 2020.

2. One-thirty-sixth of the shares subject to the option will vest on September 26, 2020 and one-thirty-sixth of the shares subject to the option will vest each month thereafter.

Remarks:

Glenna Mileson, Attorney

in fact for James A.

** Signature of Reporting

Johnson

Person

09/17/2020

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 5 (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.

POWER OF ATTORNEY

The undersigned, as a Section 16 reporting person of Athira Pharma, Inc. (the Company), hereby constitutes and appoints Glenna Mileson, Barbara Mery and each of the responsible attorneys and paralegals of Wilson Sonsini Goodrich & Rosati, Professional Corporation, the undersigneds true and lawful attorney-in-fact to:

1. complete and execute Forms ID, 3,4 and 5 and other forms and all amendments thereto as such attorney-in-fact shall in his or her discretion determine to be required or advisable pursuant to Section 16 of the Securities Exchange Act of 1934 (as amended) and the rules and regulations promulgated thereunder, or any successor laws and regulations, as a consequence of the undersigneds ownership, acquisition or disposition of securities of the Company; and

2. do all acts necessary in order to file such forms with the Securities and Exchange Commission, any securities exchange or national association, the Company and such other person or agency as the attorney-in-fact shall deem appropriate.

The undersigned hereby ratifies and confirms all that said attorneys-in-fact and agents shall do or cause to be done by virtue hereof. The undersigned acknowledges that the foregoing attorneys-in-fact, in serving in such capacity at the request of the undersigned, are not assuming, nor is the Company assuming, any of the undersigneds responsibilities to comply with Section 16 of the Securities Exchange Act of 1934 (as amended).

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms ID, 3, 4 and 5 with respect to the undersigneds holdings of and transactions in securities issued by the Company, unless earlier revoked by the undersigned in a signed writing delivered to the Company and the foregoing attorneys-in-fact.

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of August 28, 2020

Signature: /s/ James A. Johnson James A. Johnson