FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGE

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287
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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

Name and Address of Reporting Person* MOEBIUS HANS						2. Issuer Name and Ticker or Trading Symbol Athira Pharma, Inc. [ATHA]										eck all appli	ationship of Reportin c all applicable) Director Officer (give title		10% O	
	(Last) (First) (Middle) C/O ATHIRA PHARMA, INC. 18706 NORTH CREEK PARKWAY, SUITE 104					Date of /13/2		est Trar	nsacti	ion (Mo	nth/[Day/Year)		below	below) Chief Medica		below)	specify		
(Street) BOTHEI	LL W	A	98011 (Zip)		4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - No	n-Deriv	ative	e Se	curit	ies A	cqui	ired, [Disp	osed o	of, or	Ber	neficial	ly Owne	t			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution Date		Code (Ins						Benefic	es ally Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								[Code	٧	Amount	(A) or D)	Price	Transac (Instr. 3	tion(s)			(111341. 4)	
Common Stock 10/13/			3/2022	/2022				M		7,88	7,881 A		\$1.3	5 60	60,836		D			
		Т	able II -									sed of onverti				Owned				
Security (Instr. 3) Or Exerc Price of Derivation	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		of		Exp	Pate Exemination Inth/Day	Date	Amoun Securit Underly Derivat		Fitle and nount of curities derlying rivative Security str. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e ercisable		xpiration ate	Title		Amount or Number of Shares					
Stock Option (Right to Buy)	\$1.35	10/13/2022			M			7,881		(1)	08	3/14/2029	Comr		7,881	\$0.00	7,882	2	D	

Explanation of Responses:

1. One-fourth of the shares subject to the option vested on June 1, 2020 and one-fourth of the shares subject to the option vest on each year thereafter.

Remarks:

/s/ Glenna Mileson, Attorneyin-Fact for Hans Moebius 10/17/2022

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).