(Last)

(First)

(Middle)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

o longer subject	STATEMENT (OF CHAN

IGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden response: 0.5

> > 7. Nature of Indirect Beneficial Ownership (Instr. 4)

footnote(2)

footnote(3)

11. Nature of Indirect Beneficial Ownership (Instr. 4)

Check this box if no longer subjet to Section 16. Form 4 or Form 5 obligations may continue. See

	tion 1(b).	iliue. See		Filed	d pursu	ant to S	Section	n 16(a) of the	Secur	ities Exchanç	ge Act o	f 1934			nou	rs per r	esponse:	0.5
					or S	ection	30(h)	of thè	Ínvestm	ent Co	ompany Act o	of 1940							
1. Name and Address of Reporting Person*		2. Issuer Name and Ticker or Trading Symbol Astria Therapeutics, Inc. [ATXS] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)																	
PERCI	EPTIVE .	ADVISORS 1	<u>LLC</u>		AS	<u>111a 1</u>	HEL	<u>apeu</u>	<u>11CS, </u>	IIIC.	[AIAS]			•	X Direc	,		10%	Owner
		3. D	3. Date of Earliest Transaction (Month/Day/Year)										Officer (give title Other (specify						
(Last)	,	· ·	(Middle)	1		19/202					,				below	')		belo	N)
51 AST	JR PLACE	E, 10TH FLOOR			\vdash														
(Ctroot)					4. If	Amend	lment,	Date	of Origi	nal File	ed (Month/Da	ay/Year)		6. In Line		Joint/Gro	up Fili	ng (Checl	Applicable
(Street) NEW Y	ORK N	Y	10003											0	•	filed by O	ne Re	porting Pe	erson
LEW I														2	X Form	filed by M	lore th	an One R	eporting
(City)	(S	tate) ((Zip)												1 0100	,,,,			
					<u>.</u>					. 5:		, ,		_					
		Table	9 I - No	on-Deriva	ative	Secu	rities	s Ac	quired	d, Dis	sposed of	i, or B	eneti	cıal	lly Own	ed			
1. Title of	Security (Ins	str. 3)		2. Transact Date	ion	2A. Do	eemed		3. Transa	ction	4. Securities Disposed O				5. Amou Securitie	es		vnership : Direct	7. Nature of Indirect
				(Month/Day	/Year)	if any (Mont	h/Day/	Year)	Code (Instr. 8)		5)	. ,			Benefici Owned I	ally following		r Indirect str. 4)	Beneficial Ownership
						ļ`	·	,	0.4.	Ī.,	A	(A) OI	- Duite		Reporte Transac	d tion(s)	```	·	(Instr. 4)
									Code	٧	Amount	(D)	Price	•	(Instr. 3	and 4)			
Common	Stock			12/19/2	022				P		908,265	A	\$11	.01	1.038	,309(1)		I	See
											,		<u> </u>		,,,,,				footnote ⁽²
Common	Stock														1 151	,153(1)		I	See
															1,101	,100			footnote ⁽⁾
		Та	ble II								osed of,				y Owne	t			
				(e.g., pı	uts, c	alls, v	warr	ants	, opti	ons,	convertib	le se	uritie	es)					
1. Title of Derivative	2. Conversion	3. Transaction Date		eemed ution Date,	4. Trans	action	5. No	umber		e Exer	cisable and	7. Title			B. Price of Derivative	9. Numbe		10. Ownersh	11. Natu
Security (Instr. 3)	or Exercise Price of	(Month/Day/Year)	if any			(Instr.	Deri	vative urities		h/Day/		Secur	ties	8	Security Instr. 5)	Securitie Beneficia	s	Form: Direct (D	Benefic
(111341. 5)	Derivative Security		(Mont	.ii/Day/Tear/	"			uired				Deriva		- [`	111301. 0)	Owned	-	or Indire	ct (Instr. 4
	Jecumy							osed				3 and		1		Reported	Ĭ	(1) (11150.	"
								tr. 3, 4								(Instr. 4)	ion(s)		
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													or Numbe						
						V	 	<u>(</u>	Date		Expiration		of Shares						
					Code	<u> '</u>	(A)	(D)	Exerc	isable	Date	Title	Silares						
ı		f Reporting Person																	
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1 Name a	nd Address o	of Reporting Person	*																
1		togeny Ventu		nd, LP															

51 ASTOR PLACE, 10TH FLOOR								
(Street) NEW YORK	NY	10003						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* EDELMAN JOSEPH								
(Last)	(First)	(Middle)						
51 ASTOR PLACE, 10TH FLOOR								
(Street) NEW YORK	NY	10003						
(City)	(State)	(Zip)						

Explanation of Responses:

- 1. Reflects the Issuer's 6-to-1 reverse stock split effected on August 19, 2021.
- 2. The securities are directly held by Perceptive Life Sciences Master Fund Ltd. (the "Master Fund"). Perceptive Advisors LLC (the "Advisor") serves as the investment manager of Master Fund. Joseph Edelman is the managing member of the Advisor. Each of Mr. Edelman and the Advisor disclaims, for purposes of Section 16 of the Securities Exchange Act of 1934, beneficial ownership of such securities, except to the extent of his/its indirect pecuniary interest therein, and this report shall not be deemed an admission that either Mr. Edelman or the Advisor is the beneficial owner of such securities for purposes of Section 16 or for any other purposes.
- 3. The securities are directly held by Perceptive Xontogeny Ventures, L.P. ("PXV"). The Advisor serves as the investment manager of PXV, and Perceptive Xontogeny Ventures GP, LLC ("PXV GP") is the general partner of PXV. Mr. Edelman is the managing member of PXV GP and the Advisor. The Advisor, PXV GP and Mr. Edelman disclaim, for purposes of Section 16 of the Securities Exchange Act of 1934, beneficial ownership of such securities, except to the extent of his or its indirect pecuniary interest therein, and this report shall not be deemed an admission that they are the beneficial owner of such securities for purposes of Section 16 or for any other purposes.

/s/ Joseph Edelman - for Perceptive Advisors LLC, By: 12/21/2022 Joseph Edelman, its managing member /s/ Joseph Edelman - for Perceptive Life Sciences Master Fund Ltd, By: Perceptive Advisors LLC, its 12/21/2022 investment manager, By: Joseph Edelman, its managing member /s/ Joseph Edelman - for Perceptive Xontogeny Venture Fund L.P., By: Perceptive Xontogeny Ventures GP, LLC, 12/21/2022 its general partner, By: Joseph Edelman, its managing member 12/21/2022 /s/ Joseph Edelman

Date

** Signature of Reporting Person

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.