

AKERO THERAPEUTICS, INC.

Reported by ROLPH TIMOTHY

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 12/13/19 for the Period Ending 12/13/19

Address 601 GATEWAY BOULEVARD, SUITE 350

SOUTH SAN FRANCISCO, CA, 94080

Telephone 650-487-6488

CIK 0001744659

Symbol AKRO

SIC Code 2834 - Pharmaceutical Preparations

Industry Biotechnology & Medical Research

Sector Healthcare

Fiscal Year 12/31



[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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	ddress of R	eporting Pe	rson *	2.	Issu	er Name	and Tic	ker or T	rading	g Symb	ol	5. Relationship (Check all app		rting Persor	(s) to Issi	ıer
Rolph Time	othy			Al	ker	o Ther	apeuti	cs, Inc	c. [A	KRO]		,	100	0	
(Las	st) (Fin	rst) (M	iddle)	3.	Date	e of Earli	est Trans	saction	(MM/DI	D/YYYY)	DirectorX Officer (given by the content of the content o	ve title belov		Owner her (specify	below)
C/O AKER INC., 170 H							12/	/13/20	19			Chief Scientif	fic Office	r		
FLOOR	IAKDUN	WA1, 3	KD													
	(S	treet)		4.	If A	mendmer	nt, Date	Origina	l Filed	(MM/D	D/YYYY)	6. Individual o	or Joint/G	roup Filing	(Check Appl	icable Line)
SOUTH SA		KCISCO,		080								_X _ Form filed by		ting Person One Reporting F	'erson	
			Table I -	- Non-Dei	riva	tive Secu	ırities A	cquirec	d, Disp	osed o	of, or Be	neficially Owne	ed			
1.Title of Security (Instr. 3)			2.	Trans. Date	Exec		3. Trans. C (Instr. 8)	C		sed of (D) ` F	6. Amount of Securiti Following Reported T Instr. 3 and 4)			6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
							Code	V	Amount	(A) or (D)	Price					(Instr. 4)
	Ta	ıble II - Dei	rivative S	Securities	Ben	neficially	Owned	(e.g., p	outs, ca	alls, wa	rrants,	options, conver	tible secu	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	Execution Date, if any Date Date Date Date Date Date Date Date		Securities Beneficially Owned	Ownership Form of Derivative Security: of Ind Benef Ownership (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)									
	Security			Code	v	(A)	(D)	Date Exercisa		iration e	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Stock Option (Right to Buy)	\$21.09	12/13/2019		A		85000		<u>(1)</u>	12/1	12/2029	Commor Stock	n 85000	\$0	85000	D	

Explanation of Responses:

(1) This option shall vest and become exercisable in 48 equal monthly installments, commencing on December 13, 2019.

Reporting Owners

Reporting Owner Name / Address	Relationships						
Director 10% Ow	10% Owner	Officer	Other				
Rolph Timothy C/O AKERO THERAPEUTICS, INC. 170 HARBOR WAY, 3RD FLOOR SOUTH SAN FRANCISCO, CA 94080			Chief Scientific Officer				

Signatures

Signatures					
/s/ Jonathan Young, attorney-in-fact	12/13/2019				
**Signature of Reporting Person	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).
- ** 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 control number.