

[] 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 Address of Reporting Person *					2.	2. Issuer Name <b>and</b> Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Paley Jeffrey						AVENUE THERAPEUTICS, INC. [ ATXI ]							X Director 10% Owner					
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							Officer (giv	Officer (give title below) Other (specify be			below)		
C/O AVENUE THERAPEUTICS, INC., 2 GANSEVOORT STREET, 9TH						12/3/2018												
FLOOR	SEVOO	KI SII	CLL	1,91	п													
(Street)				4.	4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)						
NEW YORK, NY 10014 (City) (State) (Zip)												X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
				le I - N	on-De	erivat	ive Sec	curities A	cqu	ired, D	isposed	of, or	· Ben	neficially Owne	ed			
1.Title of Security (Instr. 3)				e 2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	ode			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: B Direct (D) O	Beneficial Ownership				
							Code	V	Amount	(A) or (D)	Pric	e				or Indirect (Instr. 4) (I) (Instr. 4)		
Common Stock 12/3/2018				2018			P		10000	A	\$5.4754		74663 (2)		D			
Common Stock 12/10/2018				2018			P		5000 A \$4.7		6	79663 ( <u>2</u> )		D				
	Tab	le II - Der	ivativ	ve Seci	urities	Bene	eficially	<b>Owned</b>	( e.g	g., puts	, calls,	warra	nts,	options, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	se	Execu	3A. Deemed Execution Date, if any			Derivat Acquire Dispose	Number of erivative Securities cquired (A) or isposed of (D) nstr. 3, 4 and 5)		6. Date Exercisable and Expiration Date			irities	Underlying Security		derivative Securities Beneficially Owned	Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security				Code	V	(A)	(D)		ate kercisable	Expiration Date	on Title	Amo	ount or Number of res		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

#### **Explanation of Responses:**

- (1) Reflects the weighted average purchase price of multiple same-way open market purchase transactions effected by the Reporting Person on the same day at different prices through a purchase order executed by a broker-dealer. The reporting person reported on a single line all such transactions that occurred within a one dollar price range. The range of prices for the purchase transactions on December 3, 2018 was \$5.4734 to \$5.4774. The reporting person hereby undertakes to provide upon request by the Securities Exchange Commission staff, the issuer, or a shareholder of the issuer, full information regarding the number of shares purchased at each separate price.
- (2) Includes 64,663 shares of restricted stock.

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Reporting Owner Ivame / Address	Director	10% Owner	Officer	Other			
Paley Jeffrey C/O AVENUE THERAPEUTICS, INC. 2 GANSEVOORT STREET, 9TH FLOOR NEW YORK, NY 10014	X						

#### **Signatures**

/s/ Lucy Lu, M.D., Attorney-in-Fact	12/12/2018			
** 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.