FORM 4

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
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours por response:							

obligations may continue. See Instruction 1(b). 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*  White William Richard						2. Issuer Name and Ticker or Trading Symbol Akero Therapeutics, Inc. [ AKRO ]									all appli Directo	cable) or (give title	g Pers	Person(s) to Issuer  10% Owner  Other (specify below)	
(Last) (First) (Middle) C/O AKERO THERAPEUTICS, INC., 601 GATEWAY BOULEVARD, SUITE 350						3. Date of Earliest Transaction (Month/Day/Year) 10/01/2021									Chief Financial Officer				
	SOUTH SAN CA 94080 FRANCISCO,					4. If Amendment, Date of Original Filed (Month/Day/Year)								3. Indiv ine) X	Form f	fual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
(City)	(3)		(Zip) ====================================	Non-Deri	vative	Sec	urit	ios A	cauire	4 D	ienoead (	of or F	enefic	ally	Οωηρο	1			
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/You			tion	2A. Deeme Execution (ear) if any		. Deemed ecution Date,		ction nstr.	4. Securities Acquired (A) or			5. Amou Securiti Benefic Owned		unt of ies ially Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
								Ì	Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	Stock			10/01/2	021				М		6,500	A	\$7.0	09	9 9,777 D				
Common	Stock			10/01/2	.021				S <sup>(1)</sup>		6,500	D	\$22.05	64(2)	3,	3,277 D			
		T	able								sposed of , converti				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed tion Date, n/Day/Year)	4. Transa Code ( 8)		of Deri Sec Acq (A) ( Disp of (I	posed D) tr. 3, 4	6. Date Exerc Expiration Da (Month/Day/V		ate	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		De Se (Ir	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ow For Dire or I (I) (	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	er					
Stock Option (Right to Buy)	\$7.009	10/01/2021			M			6,500	(3)		04/04/2029	Commo Stock	6,50	0	\$0	333,829	9	D	

## **Explanation of Responses:**

- 1. Shares sold pursuant to a Rule 10b5-1 trading plan dated June 2, 2021 previously adopted by the Reporting Person.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions in prices ranging from \$22.00 to \$22.33, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (2) to this Form 4.
- 3. 25% of this option vested on April 1, 2020, and the remaining 75% of this option shall vest in 36 equal monthly installments thereafter.

/s/ Jonathan Young, Attorney-10/05/2021 in-fact

\*\* 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 Number.