FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 * Fortress Biotech, Inc.					2. Issuer Name and Ticker or Trading Symbol AVENUE THERAPEUTICS, INC. [ATXI]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Own				
(Last)	(First)	`	/liddle)	3. Date of Earliest Transaction (Month/Day/Year) 12/31/2022										Officer (give title below)		Other (s below)		specify	
1111 KANE CONCOURSE SUITE 301 (Street) BAY HARBOR FL 33154 ISLANDS					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv	lividual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State) (Z	ľip)																
Table I - No 1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date,		3. Transact Code (Ins	ion	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an) or	5. Amount Securities Beneficiall Following Transactio	y Owned or I Reported (Ins		nership : Direct (D) lirect (I) 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
COMMON STOCK, PAR VALUE \$0.0001					31/2022				Code	v	Amount 90,90		(A) or (D)	Price \$0.00	(Instr. 3 and 4)		D		
COMMON STOCK, PAR VALUE \$0.0001				01/03	/03/2023				A		231,3	16(2)(4)	A	\$0.00	561,5	561 ⁽⁴⁾		D	
			Table II - I						ired, Dis						ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	Co	r, Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			Securiti	and Amo ies Unde ive Secu		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e s illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Co	ode	v	(A)	(D)			xpiration ate	Title		Amount or Number of Shares		Transacti (Instr. 4)	on(s)		
Class A Preferred Stock, par value \$0.0001	(3)								(3)		(3)	Comr Stoo		16,666(4)		250,00	00	D	

- 1. The Issuer is required to grant to the Reporting Person an equity fee in shares of the Issuer's Common Stock equal to 2.5% of the gross amount of any debt or equity financing consummated by the Issuer. These shares were granted by the Issuer to the Reporting Person following the closing of an equity financing.
- 2. The Reporting Person is entitled to an annual dividend on its outstanding Class A Preferred Stock equal to 2.5% of the Issuer's fully diluted outstanding capitalization on December 31. These shares were granted by the Issuer to the Reporting Person for the 2022 annual dividend.
- 3. The Issuer's Class A Preferred Stock is convertible at a fifteen to one ratio at any time at the option of the Reporting Person into shares of the Issuer's Common Stock and has no expiration date.
- 4. Effective September 22, 2022, the Issuer effected a one-for-fifteen reverse stock split of its common stock (the "Reverse Stock Split"). The amount of common stock reflected on this Form 4 has been adjusted to reflect the Reverse Stock Split.

/s/ Samuel Berry, General Counsel 01/04/2023 and Authorized Agent

** 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.