FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

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

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

1. Name and Address of Reporting  $\mathsf{Person}^\star$ Avoro Capital Advisors LLC

110 GREENE STREET

(First)

NY

(State)

(First)

1. Name and Address of Reporting Person\*

110 GREENE STREET, SUITE 800

Avoro Ventures LLC

(Middle)

10012

(Zip)

(Middle)

(Last)

(Street) **NEW YORK** 

(City)

(Last)

SUITE 800

	tions may contil ction 1(b).	nue. See		_	ilod pur	cuant	to Contina	16/	) of t	ho Soo	uritios Evoba	nao Act	of 1024				hours per res	sponse:	0.5
IIISII UC	suom I(b).			F							curities Excha Company Ac								
1. Name and Address of Reporting Person* <u>Aghazadeh Behzad</u>				2. Issuer Name and Ticker or Trading Symbol Aadi Bioscience, Inc. [ AADI ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner						
(Last) (First) (Middle) C/O AVORO CAPITAL ADVISORS LLC						3. Date of Earliest Transaction (Month/Day/Year) 08/26/2021									Officer (give title X Other (spelow)  See Remarks				
(Street) NEW YORK NY 10012				4.	If Ame	ndment, [	Date	of Ori	iginal F	iled (Month/D	6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person								
(Last) (First) (Middle)  C/O AVORO CAPITAL ADVISORS LLC  110 GREENE STREET, SUITE 800  (Street)  NEW YORK NY 10012  (City) (State) (Zip)  Table I - Non-Der  1. Title of Security (Instr. 3)  2. Transactic Date (Month/Day/												X Form filed by More than One Reporting Person							
		Tab	le I	- Non-Der	ivativ	e Se	curities	A C	quii	red, C	Disposed	of, or	Benefi	ciall	y Owned				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea				/ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		Co	Transaction Code (Instr.		I. Securities A Disposed Of (D	equired (A) or ) (Instr. 3, 4 and 5)		5) S B O	5. Amount of Securities Beneficially Owned Following Reported		6. Ownersh Form: Direc (D) or Indirec (I) (Instr. 4)	ct Indirect	Indirect Beneficial t Ownership (Instr.	
								Co	de	v	Amount	(A) or (D)	Price	T	ransaction(s) nstr. 3 and 4)				
			er	08/26/20	21			1	A		1,911,752	A	\$13.07	77	2,211,752	2	I	See	otes <sup>(1)(2)(3)</sup>
				(e.g.,			s, warra	ants			sposed of s, convert				Owned				
Derivative Security	Conversion or Exercise Price of Derivative	Date	Execution Date, if any		4. Transa Code ( 8)				Expiration (Month/Dies ed ed nstr.			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			Derivative Security		lumber of ivative surities seficially ned owing sorted nsaction(s) tr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e rcisable	Expiration Date	Title	or	ount nber ıres					
Stock option (right to buy)	\$26	08/27/2021			A		17,549			(4)	08/27/2031	Comn		,549	\$0.00		17,549	D <sup>(1)(2)(4)</sup>	
	nd Address of adeh Beh	Reporting Person*																	
		(First) FAL ADVISOR EET, SUITE 800		(Middle)															
(Street) NEW Y	ORK	NY		10012		-													
(City)		(State)		(Zip)		_													

(Street) NEW YORK	NY	10012	
(City)	(State)	(Zip)	

## **Explanation of Responses:**

- 1. This Form 4 is filed by Avoro Capital Advisors LLC, a Delaware limited liability company ("Avoro Capital Advisors"), Avoro Ventures LLC, a Delaware limited liability company ("Avoro Ventures") and Belzad Aghazadeh ("Dr. Aghazadeh", and together with Avoro Capital Advisors and Avoro Ventures, the "Reporting Persons"). Dr. Aghazadeh serves as the portfolio manager and controlling person of Avoro Capital Advisors and Avoro Ventures LLC.
- 2. The filing of this statement shall not be deemed an admission that any Reporting Person is the beneficial owner of the securities reported herein for purposes of Section 16 of the Securities Act of 1934, as amended, or otherwise. Each of the Reporting Persons expressly disclaims beneficial ownership of the securities reported herein except to the extent of its or his pecuniary interest therein.
- 3. The securities reported herein were acquired on behalf of accounts managed by Avoro Capital Advisors and Avoro Ventures directly from the Issuer in a PIPE financing completed in connection with the closing of the Agreement and Plan of Merger between the Issuer and Aadi Bioscience, Inc., dated as of May 16, 2021, following which the Issuer changed its name to Aadi Bioscience, Inc.
- 4. In connection with the closing of the Merger, as approved by the stockholders of the Issuer on August 17, 2021, the Board granted on August 26, 2021 to the Reporting Person an Initial Award (as defined in the Issuer's Outside Director Compensation Policy and in accordance with the Issuer's 2021 Equity Incentive Plan (the "Plan")). Subject to the Reporting Person continuing to be a Service Provider (as defined in the Plan) through each applicable date, the Initial Award is scheduled to vest as to one thirty-sixth (1/36th) of the shares of common stock subject to the Initial Award on a monthly basis following the grant date on the same day of the month as the grant date (and if there is no corresponding day, on the last day of the month). The grant date is August 27, 2021.

## Remarks:

Avoro Capital Advisors and Avoro Ventures may be deemed directors by deputization of the Issuer by virtue of the fact that Dr. Aghazadeh currently serves on the board of directors of the Issuer.

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.