SEC Form 4 FOF	RM 4	UNITEI	) STATES	SECURITIES	S ANI	) E)	CHANG	SE CO	OMMIS	SION					
			Washing	OMB APPROVAL											
Check this box Section 16. For obligations may Instruction 1(b)	/ continue. See	Filed purs	pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940								OMB Number: 3235-0287   Estimated average burden hours per response: 0.5				
1. Name and Address of Reporting Person <sup>*</sup> Resnick Joshua				2. Issuer Name and Ticker or Trading Symbol Aerovate Therapeutics, Inc. [ AVTE ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O AEROVATE THERAPEUTICS, INC. 930 WINTER STREET, SUITE M-500				Date of Earliest Transa 06/2023	ay/Year)		Officer (give t below)	ive title Other ( below)		(specify					
				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) WALTHAM MA 02451							Form filed by More than One Reporting Person								
(City)	(State)	(Zip)	Ri	Rule 10b5-1(c) Transaction Indication        Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											
		Table I - No	n-Derivative	Securities Acq	uired,	Disp	osed of, c	or Ben	eficially	Owned					
Date			2. Transaction Date (Month/Day/Yea	ar) 2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Followi Reported	F	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
					Code	v	Amount	Amount (A) or (D)		Transaction(s) (Instr. 3 and 4)			(Instr. 4)		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned     (e.g., puts, calls, warrants, options, convertible securities)															
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$16.3	06/06/2023		Α		12,500		(1)	06/05/2033	Common Stock	12,500	\$0	12,500	D <sup>(2)</sup>	

## Explanation of Responses:

1. The shares subject to this option will vest and become exercisable in full on the earlier of (i) June 6, 2024 or (ii) the next annual meeting of the Issuer's stockholders, subject to the Reporting Person's continued service through the applicable vesting date.

2. Under the Reporting Person's arrangement with RA Capital Management, L.P. (the "Adviser"), the Reporting Person holds the option for the benefit of the RA Capital Healthcare Fund, L.P. (the "Fund"), RA Capital Nexus Fund, L.P. (the "Nexus Fund"), and a separately managed account (the "Account"). The Reporting Person is obligated to turn over to the Adviser any net cash or stock received upon exercise of the option, which will offset advisory fees owed by the Fund, the Nexus Fund, and the Account to the Adviser. The Reporting Person therefore disclaims beneficial ownership of the option and underlying common stock.

> /s/ George A. Eldridge, Attorney-in-Fact

06/08/2023

\*\* 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.