SEC Form 4													
FORM 4	D STATES	SECURITIE Washing	S ANI jton, D.C		OMMIS	SION	OMB APPROVAL						
Check this box if no longer subject Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	Filed pursu	AT OF CHANGES IN BENEFICIAL OWNERS d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940							HIP OMB Number: 3235-0287 Estimated average burden hours per response: 0.5				
1. Name and Address of Reporting Person [*] Howe Jill Ann			2. Issuer Name and Ticker or Trading Symbol BIORA THERAPEUTICS, INC. [BIOR]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) C/O BIORA THERAPEUTICS, INC. 4330 LA JOLLA VILLAGE DRIVE, SUITE 300			ate of Earliest Transa 4/2023	action (M	onth/[Day/Year)		Officer (give ti below)		r (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) SAN DIEGO CA	92122								Form filed by Person	More than One Re	porting		
(City) (State)	(Zip)		 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	oosed of, o	r Ben	eficially	Owned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities A Disposed Of (5)			5. Amount of Securities Beneficially Owned Followin Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership		
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)		

3A. Deemed Execution Date, if any 6. Date Exercisable and Expiration Date (Month/Day/Year) 3. Transaction Date 7. Title and Amount of Securities 5. Number 4. 5. Number Transaction of Code (Instr. Derivative (Month/Day/Year)

06/14/2023

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)		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)		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)	\$4.7	06/14/2023		А		12,500		(2)	06/14/2033	Common Stock	12,500	\$0.00	12,500	D	

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

12,500⁽¹⁾

Explanation of Responses:

Common Stock

1. Represents 12,500 restricted stock units, which vest in full on the earlier of (1) the first anniversary of the grant date or (2) the date of the Issuer's 2024 annual meeting of stockholders, subject to the Reporting Person's continued service to the Issuer.

2. This option represents the right to purchase 12,500 shares of the Issuer's common stock, and vests in full on the earlier of (1) the first anniversary of the grant date or (2) the date of the Issuer's 2024 annual meeting of stockholders, subject to the Reporting Person's continued service to the Issuer.

> /s/ Clarke Neumann, Attorney-06/16/2023

in-Fact for Jill Ann Howe

\$0.00

19,416

D

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** 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.