FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Was	hing	ton,	D.C.	2054	1

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

HIGHCAPE PARTNERS QP, L.P.

(Last)

(First)

(Middle)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

7. Nature of Indirect Beneficial Ownership (Instr. 4)

11. Nature of Indirect Beneficial Ownership (Instr. 4)

footnote⁽²⁾

footnote⁽³⁾

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					01	r Secti	on 30(h)	of the	Investment C	Company Act	of 1940							
1. Name and Address of Reporting Person* <u>HighCape Capital, L.P.</u>				2. Issuer Name and Ticker or Trading Symbol AZIYO BIOLOGICS, INC. [AZYO]								elationship of Reporting ck all applicable) Director			Person(s) to Issuer X 10% Owner			
1	I AVENUE	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year)							Officer (give title below)		Other below		(specify)	
21ST FI	LOOR				_ 4.	If Ame	endment,	Date	of Original Fil	ed (Month/Da	ay/Year)			ividual or .	Joint/Group	Filing	ι (Check Αμ	plicable
(Street) NEW YORK NY 10018										Line) X	Form f	iled by Moi		orting Person One Repo				
(City)	(8	state)	(Zip)															
			ole I - No	_					quired, D	_				1				
1. Title of Security (Instr. 3) 2. Trans Date (Month/			ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Ins	Transaction Disposed Code (Instr. 5)		ties Acquired (A) or d Of (D) (Instr. 3, 4 a			es For ially (D) Following (I) (Form (D) o	Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indire Beneficia Ownersh			
									Code V	Amount	(A) o	r Pric	ce	Reporte Transac (Instr. 3	ion(s)			(Instr. 4)
									uired, Dis					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date,	4. Transa Code (8)	action	5. Num of Derivat Securit Acquir (A) or Dispos of (D) (3, 4 and	ber ive ies ed ed Instr.	6. Date Exer Expiration D (Month/Day/	cisable and ate	7. Title an of Securit Underlyin Derivative (Instr. 3 a	nd Amou ties ng e Securi	d Amount es Derivative Security (Instr. 5) Beneficiall Owned Following Reported		ecurities eneficially wned ollowing eported ransaction(s) Form: Direct (D) or Indirec (I) (Instr. 4		Benef Owne t (Instr.	
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Share	er					
Stock Option (Right to Buy)	\$6.28	06/07/2022			A		22,090		(1)	06/06/2032	Class A Common Stock	22,0	90	\$0	22,09	0	I	See
Stock Option (Right to Buy)	\$6.28	06/07/2022			Α		22,090		(1)	06/06/2032	Class A Common Stock	22,09	90	\$0	22,09	0	I	See
	nd Address of ape Capit	Reporting Person*																
(Last) 452 5TH 21ST FI	I AVENUE LOOR	(First)	(Midd	le)														
(Street)	ORK	NY	1001	8														
(City)		(State)	(Zip)															
1		REPORTING PERSON*																
1	I AVENUE	(First)	(Midd	le)														
21ST FI	JUK																	
(Street) NEW Y	ORK	NY	1001	8														
(City)		(State)	(Zip)															
1. Name a	nd Address of	Reporting Person*																

452 5TH AVENUE 21ST FLOOR		
(Street) NEW YORK	NY	10018
(City)	(State)	(Zip)
1. Name and Address o <u>HighCape Partn</u>		
(Last) 452 5TH AVENUE 21ST FLOOR	(First)	(Middle)
(Street) NEW YORK	NY	10018
(City)	(State)	(Zip)
1. Name and Address o <u>HighCape Partn</u>		
(Last) 452 5TH AVENUE 21ST FLOOR	(First)	(Middle)
(Street) NEW YORK	NY	10018
(City)	(State)	(Zip)
1. Name and Address o <u>HighCape Co-It</u>	f Reporting Person*	e I, LLC
(Last) 452 5TH AVENUE 21ST FLOOR	(First)	(Middle)
(Street) NEW YORK	NY	10018
(City)	(State)	(Zip)
1. Name and Address o <u>HighCape Co-Ir</u>	f Reporting Person* nvestment Vehicle	e II, LLC
(Last) 452 5TH AVENUE 21ST FLOOR	(First)	(Middle)
(Street) NEW YORK	NY	10018
(City)	(State)	(Zip)
1. Name and Address o		
(Last) 452 5TH AVENUE 21ST FLOOR	(First)	(Middle)
(Street) NEW YORK	NY	10018
(City)	(State)	(Zip)
1. Name and Address o Zuga Matt	f Reporting Person*	
(Last) 452 5TH AVENUE	(First)	(Middle)

21ST FLOOR		
(Street) NEW YORK	NY	10018
(City)	(State)	(Zip)
1. Name and Address RAKIN KEVII		
(Last) 452 5TH AVENUI 21ST FLOOR	(First)	(Middle)
(Street) NEW YORK	NY	10018
(City)	(State)	(Zip)

Explanation of Responses:

- 2. Held by Kevin L. Rakin as non-employee member of the Issuer's board of directors.
- 3. Held by W. Matthew Zuga as non-employee member of the Issuer's board of directors.

/s/ Kevin L. Rakin	06/09/2022
/s/ W. Matthew Zuga	06/09/2022
HighCape Partners GP, LLC By: /s/ W. Matthew Zuga, Managing Member	06/09/2022
HighCape Partners GP, L.P. By: /s/ W. Matthew Zuga, Managing Member	06/09/2022
HighCape Partners, L.P. By: /s/ HighCape Partners GP, L.P., its general partner By: HighCape Partners GP, LLC, its general partner By: /s/ W. Matthew Zuga, Managing Member	06/09/2022
HighCape Partners QP, L.P. By: /s/ HighCape Partners GP, L.P., its general partner By: HighCape Partners GP, LLC, its general partner By: /s/ W. Matthew Zuga, Managing Member	06/09/2022
HighCape Capital, L.P. By: /s/ W. Matthew Zuga, Managing Member	06/09/2022
HighCape Capital, LLC By: /s/ W. Matthew Zuga	06/09/2022
HighCape Co-Investment Vehicle I, LLC By; /s/ HighCape Partners GP, L.P., its general partner By; HighCape Partners GP, LLC, its general partner By; /s/ W, Matthew Zuga, Managing Member	06/09/2022
HighCape Co-Investment Vehicle II, LLC By: /s/ HighCape Partners GP, L.P., its general partner By: HighCape Partners GP, LLC, its general partner By: /s/ W. Matthew Zuga, Managing Member	06/09/2022
** Signature of Reporting Person	Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{1.} This option was granted automatically under the Issuer's Non-Employee Director Compensation Program and vests and becomes exercisable on the earlier of (i) the day immediately preceding the date of the Issuer's first annual meeting following the date of grant and (ii) the first anniversary of the date of grant, subject to Messrs. Rakin's and Zuga's, as applicable, continuing in service on the Issuer's board of directors through the applicable vesting date.

 $^{^{\}star}$ 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).