FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549	
vasiiiigtoii,	D.C.	20349	

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

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

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* KEMP CHRIS			2. Issuer Name and Ticker or Trading Symbol Astra Space, Inc. [ASTR]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
(Last)		irst)	(Middle)	3.	3. Date of Earliest Transaction (Month/Day/Year) 06/08/2023))	Officer (below)	give title	X utive	Other (sp	
1900 SKYHAWK STREET				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	DA C	A	94501								Y	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(9	itate)	(Zip)	R	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.							satisfy				
		Ta	able I - Non-D	erivati	ve S	Secu	ırities Ad	cquired, C	isposed	l of, or B	eneficially	Owned				
Date			te	ansaction : nth/Day/Year)		2A. Deemed Execution Date if any (Month/Day/Yea	Code (In:			uired (A) or Instr. 3, 4 and 5	5. Amoun Securities Beneficial Owned Fo Reported	s Forr lly (D) o ollowing (I) (li		m: Direct II or Indirect E Instr. 4) C	7. Nature of ndirect Beneficial Ownership Instr. 4)	
								Code	V Amo	unt (A) or) Price	Transaction (Instr. 3 and	ction(s)			11341.4)
			Table II - De (e.					uired, Dis s, options				Owned				
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. Transac Code (Ir 8)		Deri Seci Acq or D	umber of vative urities uired (A) isposed o) (Instr. 3, d 5)	Expiration Date (Month/Day/Year) Securitie Derivativ (Instr. 3 a		nd Amount of es Underlying re Security and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		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	1 Title	Amount or Number of Shares		(Instr. 4)	ion(s)		
Employee stock option (right to buy)	\$9.04	06/08/2023		J			6,508,088	(1)	09/20/203	Class A Commor Stock	6,508,088	\$0	0		D	

Explanation of Responses:

1. On September 20, 2021, the reporting person received a grant of a stock option under the Astra Space, Inc. 2021 Omnibus Incentive Plan (the "Plan") vesting pursuant to certain milestones (the "PSOs") as part of Astra Space Inc.'s (the "Company") long term incentive plan for executive officers. On June 8, 2023, the stockholders of the Company approved the termination of the PSOs at the Company's 2023 Annual Meeting of Stockholders. Details regarding the termination of the PSOs are available in the Company's Definitive Proxy Statement for the 2023 Annual Meeting of Stockholders filed with the SEC on April 28, 2023.

/s/ Chris Kemp

06/12/2023

** Signature of Reporting Person

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.