FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.	C. 20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Hart Daniel Ryan					2. Issuer Name and Ticker or Trading Symbol Avid Bioservices, Inc. [ CDMO ]								(Chec	k all app Direc	licable)	ng Person(s) to Is: 10% Ow Other (s		wner		
(Last) 2642 MI	(Fir	est) (N DRIVE., SUITE	Middle) 200			3. Date of Earliest Transaction (Month/Day/Year) 03/16/2020													эрсспу	
(Street) TUSTIN (City)			2780 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line) X	Form Form	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - Noi	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or B	Benef	iciall	y Own	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Date,		Date,	3. Transaction Code (Instr. 8)					4 and Securi Benefi		ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	Amount	(A) (D)	or Pi	ice	Transaction(s) (Instr. 3 and 4)				(111341.4)					
Common Stock, \$0.001 par value 03/16/3				2020	2020		P		1,000	A	. 4	3.75	5 5,982			D				
Common Stock, \$0.001 par value 03/16/			2020			P		6,500	A	.   \$	3.77	12	12,482		D					
		Tal									osed of, o				Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, Day/Year)	n Date, Transac Code (Ir				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dir or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amou or Numb of Share	er								

**Explanation of Responses:** 

/s/ Daniel R. Hart

03/17/2020

\*\* 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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).