FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB API	IB APPROVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours per response	۰ 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

											<u> </u>									
1. Name and Address of Reporting Person* Hancock Richard B				2. Issuer Name and Ticker or Trading Symbol Avid Bioservices, Inc. [CDMO]								5. Rela (Check								
(Last)		(First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 09/01/2022								Officer below)	(give title	10% Ov e Other (s below)		·	
(Street) TUSTIN CA 92780						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(City)	(S	tate)	(Zip)		-										Form filed by More than One Reporting Person					
		Tab	le I - 1	Non-Deriv	ativ	e Sec	uriti	ies A	cquire	ed, D	isposed o	of, or B	enefic	cially	Owned	t				
Dat			2. Transacti Date (Month/Day	Exec Day/Year) if an		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and		i 5)	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	ction(s)			(Instr. 4)		
Common Stock, \$0.001 par value 09/01/202					022	2		M		2,987	Α	\$4.	.53	40	10,202		D			
Common	Stock, \$0.0	001 par value		09/01/20	022		s ⁽¹⁾ 2,987 D \$17.1219 ⁽²⁾ 3		37	37,215		D								
Common	Common Stock, \$0.001 par value 09/01/202			022	122			S ⁽¹⁾		334	D	\$17	.07	36,881			D			
		7	Table I								sposed of , converti				wned					
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. Transa Code 8)	action (Instr.			6. Date Expira (Monti	ation D		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		De Se (In	Price of crivative curity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amor or Numb of Share	ber						
Stock Option	\$4.53	09/01/2022			M ⁽¹⁾			2,987	(3	3)	05/07/2026	Commo	2,98	87 \$	0.0000	215,88	7	D		

Explanation of Responses:

- 1. The transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on October 15, 2021.
- 2. Represents a weighted average sales price per share. These shares were sold at prices ranging from \$16.86 to \$17.51. The Reporting Person has provided to the Issuer, and hereby undertakes to provide the SEC staff or a security holder of the Issuer, upon request, information regarding the number of shares sold at each respective price within the range set forth in this foomote.
- 3. Stock option granted to the reporting person on May 2, 2019, vests in four (4) equal annual installments beginning May 7, 2020 and each year thereafter until fully-vested, subject to the reporting person's continuous service to the Issuer on such vesting.

/s/ Stephen Hedberg, by Power 09/02/2022 of Attorney for Richard B. Hancock

** 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.