FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burde	en						
hours per 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*  CARLEONE JOSEPH					2. Issuer Name <b>and</b> Ticker or Trading Symbol Avid Bioservices, Inc. [ CDMO ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
CARLEUNE JUSEPH												Oirecto	r		10% Ow	ner	
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 12/14/2018							Officer (give title below)			Other (s below)	pecify		
2642 MICHELLE DRIVE, SUITE 200																	
						4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)  TUSTIN CA		Δ	02700									X Form filed by One Reporting Person				ı	
TUSTIN		A	92780									Form filed by More than One Reporting Person					
(City) (State) (Zip)			(Zip)														
		Tal	ble I - Non-	Deriva	tive S	ecuritie	s Ac	quired, Di	sposed o	f, or Ber	neficiall	y Owned					
1. Title of Security (Instr. 3)  2. Trans Date (Month/I					action 2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 5)					es Form ally (D) ( Following (I) (I		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code V	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)		
			Table II - D (e					uired, Disp 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/Yea	4. Transaction Code (Instr.		5. Number of		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)	Beneficial Ownership (Instr. 4)	
				Cod	de V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Stock Option (right to buy)	\$5.22	12/14/2018		A		19,600		12/14/2019 <sup>(1)</sup>	12/14/2025	Common Stock	19,600	\$0	94,600	)	D		

## **Explanation of Responses:**

1. This option fully vests one year from the date of grant.

/s/ Stephen Hedberg, by Power 12/18/2018 of Attorney for Joseph Carleone

\*\* 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.