FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE	S IN BENEF	ICIAL OW	NERSHIP

	OMB APPROVAL									
l	OMB Number:	3235-0287								
l	Estimated average bu	urden								
l	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

							<u> </u>			<u> </u>									
Name and Address of Reporting Person* Carleone Joseph					2. Issuer Name and Ticker or Trading Symbol Avid Bioservices, Inc. [CDMO]							(Che	Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Own						
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 12/14/2023							Officer below)	Officer (give title below)		Other (specify below)			
14191 MYFORD ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)													X Form filed by One Reporting Person						
TUSTIN CA 92780														Form filed by More than One Reporting Person					
(City)	(S	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.																
		Та	ble I - Nor	n-Deriva	ative	Securiti	es Acc	quired,	Dis	posed of	f, or Ben	eficially	/ Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					action 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)					Form:	Direct I Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
							Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)							
Common Stock, \$0.001 par value 12/14/				/2023 M 9,612 A		(1)	103	103,568		D									
			Table II -					,	•	osed of, onvertib		•	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 D if any (Month/Day/	ate, Tra	insaction Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)			ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
				Co	de V	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	J.1(3)				
Restricted Stock Units	(1)	12/14/2023		N	И		9,612	(2)		(2)	Common Stock	9,612	\$0	0		D			
Restricted Stock	(1)	12/14/2023		A ⁽	(3)	26,756		(4)		(4)	Common Stock	26,756	\$0	26,756	5	D			

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents the contingent right to receive, upon vesting, one share of the Issuer's Common Stock
- 2. RSUs granted to the reporting person on December 14, 2022 pursuant to the Issuer's non-employee director compensation program fully vested on December 14, 2023.
- 3. Annual equity award grant pursuant to the Issuer's non-employee director compensation program.
- 4. RSUs granted to the reporting person on December 14, 2023 shall fully vest on December 14, 2024, subject to the reporting person's continuous service to the Issuer on such vesting date.

<u>/s/ Stephen Hedberg, by Power</u> of Attorney for Joseph 12/18/2023

Carleone, Ph.D.

** 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.