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 burden								
hours per response: 0								

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*  Kwon SoYoung					2. Issuer Name and Ticker or Trading Symbol Aptevo Therapeutics Inc. [ APVO ]										eck all app Dired	blicable) ctor		rson(s) to Iss	vner	
(Last)	(Fi H AVENUE	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/31/2024									A belo	,		Other (s below) orp Affairs	·	
SUITE 1050					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	6. Individual or Joint/Group Filing (Check Applicable ine)						
(Street) SEATTL	E W	A 9	98121												Forn	Form filed by One Reporting Person  Form filed by More than One Reporting Person				
(City)	(Si	tate)	Zip)		Ru	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.										ed to					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date					Day/Year)   Ex		2A. Deemed Execution Date, if any (Month/Day/Year)		Cod	Transaction Dispose Code (Instr. 5)		rities Acquired (A) o ad Of (D) (Instr. 3, 4 a			Securi Benefi	cially I Following	Form (D) o	n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership Instr. 4)	
									Cod	e V		Amount		(A) or (D)	Price	Transa	ction(s) 3 and 4)	"		
Common Stock 05					1/2024				M			42 A		(1)	588(2)			D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  (Instr. 3)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)				Date,	4. Transaction Code (Instr. 8)		n of E		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price o Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Exp Dat	piration te	Title	1	Amount or Number of Shares					
Restricted Stock Unit	(1)	05/31/2024			M			42	(3)			(3)		nmon	42	\$ <mark>0</mark>	0		D	

## **Explanation of Responses:**

- 1. Restricted Stock Units ("RSUs") convert into common stock, \$0.001 par value per share, of the Issuer on a one-for-one basis.
- 2. On March 5, 2024, the Issuer effected a 1-for-44 reverse stock split of its common stock (the "Reverse Stock Split"). The amount of securities reported on this Form 4 have been adjusted to reflect the
- 3. On June 1, 2021, the reporting person was granted 5,500 (125 post-reverse split) RSUs, vesting in three approximately equal annual installments beginning on May 31, 2022.

SoYoung Kwon 06/03/2024 \*\* 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.