| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

| 1. Name and Address of Reporting Person [*] White Marvin L | | | 2. Issuer Name and Ticker or Trading Symbol <u>Aptevo Therapeutics Inc.</u> [APVO] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|--|---------------|----------------|---|---|--|--|--|--|
| | | | | X Director 10% Owner | | | | |
| (Last) (First) | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | X Officer (give title Other (specify below) | | | | |
| 2401 4TH AVENUE, SUITE 1050 | | | 06/01/2017 | President and CEO | | | | |
| (Street) SEATTLE (City) | WA (State) | 98121 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabla I Nam D | avivative Convertion Approximate Dispessed of an Dan | oficially Owned | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | Date (Month/Day/Year) | Transaction Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | Securities Beneficially Owned Following | (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---------------------------------|--------------------------|-----------------------------|---|---|---------------|-------|--|----------------|---|--|
| | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (1130.4) | |

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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of | | 6. Date Exerc Expiration Da (Month/Day/Y | ate | 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) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Employee Stock Option (right to buy) | \$2.15 | 06/01/2017 ⁽¹⁾ | | A | | 75,800 | | (2) | 05/31/2027 | Common Stock | 75,800 | \$0 | 75,800 | D | |

Explanation of Responses:

1. The option grant was approved by a committee of Aptevo Therapeutics Inc.'s board of directors on February 22, 2017, subject to stockholder approval of the Amended and Restated 2016 Stock Incentive Plan (the "Plan") under which the option was granted. Aptevo Therapeutics Inc.'s stockholders approved the Plan on May 31, 2017.

2. The option vests in three equal annual installments beginning on June 1, 2018.

/s/ Benjamin J. Stein, attorney-06/01/2017 in-fact

Date

** 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.