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Shepard Jay Form 4	у									
March 04, 2										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							COMMISSION		APPROVAL	
Check	this box		Wa	ashington	, D.C. 2	0549		Number:	3235-0287	
Check this box if no longer subject to STATEMENT OF CHANGES IN BI					TICIAL OV	WNERSHIP OF	Expires: Estimated	January 31, 2005 average		
Section 16. SECURITIES burden hours per								urs per		
(Print or Type	e Responses)									
1. Name and Address of Reporting Person <u>*</u> Shepard Jay			2. Issuer Name and Ticker or Trading Symbol			r Trading	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Middle)	Aravive, Inc. [ARAV] 3. Date of Earliest Transaction				(Check all applicable)			
C/O ARA LYONDE	VIVE, INC., LLBASSELL 1221 MCKINNEY			Day/Year)			_X_ Director _X_ Officer (give below) Pres		% Owner her (specify)	
				Month/Day/Year)		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
HOUSTO	N, TX 77010						Form filed by M Person			
(City)	(State)	(Zip)	Tal	ole I - Non-	Derivative	Securities A	cquired, Disposed of	f, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactic Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or of (D)	SecuritiesFBeneficially(1)Owned(1)	5. Ownership Form: Direct D) or Indirect I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Re	eport on a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned directly o	or indirectly.			
					inforı requi	nation cont red to respo ays a currer	spond to the collec ained in this form ond unless the forr ntly valid OMB con	are not n	SEC 1474 (9-02)	
	Tab					sposed of, or convertible s	Beneficially Owned securities)			
		saction Date /Day/Year)			4. Transact	5. Number iorDerivative			7. Title and Amount of Underlying Securities	

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		or D)	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	7 (A) (A	D) Date Exercisable	Expiration Date	Title	Amount o Number o Shares	
Stock Option	\$ 5.83	02/28/2019		А	116,000 (1)	03/28/2019	02/27/2029	Common Stock	116,00	

Reporting Owners

Reporting Owner Name / Address		Relationships				
I G G G G G G G G G G G G G G G G G G G	Director	10% Owner	Officer	Other		
Shepard Jay C/O ARAVIVE, INC., LYONDELLBASSELL TOWER 1221 MCKINNEY ST. HOUSTON, TX 77010		Х	President and CEO			
Signatures						
/s/ Kevin Haas, Attorney-in-fact	03/04/2019					
<u>**</u> Signature of Reporting Person	Date					

Explanation of Responses:

* 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).

(1) These options vest pro rata on a monthly basis over 48 months.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.