FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB AP	PROVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours por rospons	o. 0 F							

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* Jenkins Abigail					AC	2. Issuer Name and Ticker or Trading Symbol AQUINOX PHARMACEUTICALS, INC [AQXP]									all applic Directo Officer	able) r (give title	g Pers	on(s) to Iss 10% Ow Other (s	/ner
(Last) (First) (Middle) C/O AQUINOX PHARMACEUTICALS, INC. 450 - 887 GREAT NORTHERN WAY				08/	3. Date of Earliest Transaction (Month/Day/Year) 08/03/2016								Chief Commercial Officer						
(Street) VANCOUVER A1 V5T 4T5 (City) (State) (Zip)				4.11	4. If Amendment, Date of Original Filed (Month/Day/Year)								ine) X	·					
		Tab	le I - Nor	n-Deriv	ative	e Se	curities	s Ac	quired, D	isp	osed o	f, or Be	neficia	ally	Owned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				action	ar)	2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Code (Instr. 5		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			or 5. Amou 4 and Securitie Beneficie Owned F		nt of s ally ollowing	Form (D) or	orm: Direct	7. Nature of Indirect Beneficial Ownership	
									Code V	,	Amount	(A) or (D)	Price	•	Reported Transacti (Instr. 3 a	tion(s)			(Instr. 4)
		-							uired, Dis , options						wned				
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. Transaction Code (Instr 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title an of Securit Underlyin Derivative (Instr. 3 a	Derivative Security		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		piration tte	Title	Amoun or Numbe of Shares	r					
Stock Option (Right to Buy)	\$8.97	08/03/2016			A		50,000		(1)	08/	/02/2026	Common Stock	50,00	0	\$0.00	50,000)	D	

Explanation of Responses:

1. The shares subject to this option shall vest and become exercisable at a rate of twenty-five percent of the total number of shares underlying the options on the one-year anniversary of the vesting commencement date and 1/48th of the total number of shares underlying the options each monthly anniversary of the vesting commencement date thereafter for so long as the recipient of the option provides continuous service to the issuer, such that the total number of shares underlying the options shall be fully vested on the four-year anniversary of the vesting commencement date.

Remarks:

/s/ Abigail Jenkins

08/05/2016

** 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.