FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person*     Troupin Barbara						2. Issuer Name <b>and</b> Ticker or Trading Symbol AQUINOX PHARMACEUTICALS, INC [ AQXP]									c all applic Directo	able)	g Pers	ion(s) to Issu 10% Ow Other (s	ner	
(Last) (First) (Middle) C/O AQUINOX PHARMACEUTICALS, INC. 450 - 887 GREAT NORTHERN WAY						3. Date of Earliest Transaction (Month/Day/Year) 03/09/2018									X Officer (gree title Other (specify below)  Chief Medical Officer					
(Street)  VANCOUVER A1 V5T 4T5  (City) (State) (Zip)					4. l	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable te)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ear)	ZA. Deemed Execution Date, f any Month/Day/Year)		Code (In	Transaction Disposed Code (Instr. 5)		ties Acquired (A) o d Of (D) (Instr. 3, 4 a		nd Securitie Beneficia		s For ally (D) following (I) (		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	,	Amount	(A) oi (D)	Price	е	Transact (Instr. 3 a	on(s)			msu. 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. Deemec Execution I if any (Month/Day	Date,	4. Transaction Code (Insti				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)		D S	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		kpiration ate	Title	Amour or Number of Shares	er						
Stock Option (Right to Buy)	\$16.55	03/09/2018			A		75,000		(1)	03	3/08/2028	Common Stock	75,00	0	\$0.00	75,000	)	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 March 9, 2018 (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/ Barbara Troupin

03/13/2018

\*\* 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.