FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
l	OMB Number:	3235-0287							
l	Estimated average burde	en							
l	hours per response:	0.5							

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*  MacKenzie Lloyd							2. Issuer Name and Ticker or Trading Symbol AQUINOX PHARMACEUTICALS, INC [ AQXP]								cable) or (give title	g Pers	son(s) to Iss 10% Ov Other (s	vner
(Last) (First) (Middle) C/O AQUINOX PHARMACEUTICALS, INC. 450 - 887 GREAT NORTHERN WAY							015				/Day/Year)		X Officer (give title Officer (specify below)  VP Technical Operations					
(Street) VANCOUVER A1 V5T 4T5					_	If Ame	ndment, I	Date o	of Origina	l Filed	d (Month/Da	Line	Individual or Joint/Group Filing (Check Applicable Line)     Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(5	state)	(Zip)			- 0-		- • -				f D	6: . : . 1		•			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					action	2/ Er) if	P.A. Deemed Execution Date, f any Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4		l (A) or	5. Amou Securiti Benefic	int of es ially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)			(Instr. 4)
Common	Stock		2/2015	2015			М		7,812	A	\$5.76	5 7,	312		D			
Common Stock 08/12/2							2015				28,075	A	\$5.76	35	,887		D	
Common Stock 08/12/2							2015		S		35,887	D	\$18.67	(1)	0		D	
		-	Table II								osed of, convertil			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercis Expiration Date (Month/Day/Ye		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares	per				
Stock Option (Right to Buy)	\$5.76	08/12/2015			M		7,812		(2)		06/10/2020	Common Stock	7,812	\$0.00	0		D	
Stock Option (Right to Buy)	\$5.76	08/12/2015			М		28,075		(3)		11/10/2021	Common Stock	28,075	\$0.00	1,872	!	D	

## Explanation of Responses

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$17.775 to \$20.43. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price withinh the ranges set in this footnote.
- 2. Fully vested.

3. 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/ Lloyd Mackenzie

\*\* Signature of Reporting Person

08/14/2015

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.