## 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*     Lutwyche Peter						2. Issuer Name and Ticker or Trading Symbol Arbutus Biopharma Corp [ ABUS ]									Check all and Di	applicable) rector fficer (give title		Person(s) to Issuer  10% Owner Other (specify	
(Last) (First) (Middle) C/O ARBUTUS BIOPHARMA CORP SUITE 100, 8900 GLENLYON PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 04/11/2018									A be	elow) Former Chie	ef Te	below)	
(Street) BURNABY A1 V5J 5J8 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Individual or Joint/Group Filing (Check Applicable ine)  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. Transar Date (Month/Date)						ar) E	Execution f any	A. Deemed kecution Date, any lonth/Day/Year)		Transaction Disposed Code (Instr. 5)			ties Acquired (A) d Of (D) (Instr. 3,		nd Sec Ber Ow Rep	mount of curities deficially ned Following ported	For (D)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										v	Amount	(A) or (D) Pr		Price		Transaction(s) (Instr. 3 and 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)	ative Conversion Date Execution or Exercise (Month/Day/Year) if any			Date, Transaction Code (Instr		Instr.	5. Num of Deriv. Secun Acqu (A) or Dispc of (D) (Instr. and 5	ative rities ired osed . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Date Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount or Number of Shares		ount	8. Price of Derivative Security (Instr. 5)		,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

**Explanation of Responses:** 

/s/ Peter Lutwyche

04/13/2018

\*\* 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.