## 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 3235-0287 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

1. Name and Address of Reporting Person*  Kowalski Mark						2. Issuer Name <b>and</b> Ticker or Trading Symbol Arbutus Biopharma Corp [ ABUS ]									heck all ap Dire	' '	10	to Issuer % Owner her (specify	
(Last) (First) (Middle)  C/O ARBUTUS BIOPHARMA CORP.  SUITE 100, 8900 GLENLYON PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 03/04/2015									A belo	r VP & Chief Medical Of		low)		
(Street) BURNABY A1 V5J 5J8  (City) (State) (Zip)			/5J 5J8		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	(Zip)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  2. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Code V Amount (A) or (D) Price (D) (Instr. 3, 4 and 5) (Instr. 4) (Instr. 4)																
Date				eay/Year) if a		Execution f any	xecution Date, any		Transaction Disposed Code (Instr. 5)					Secur Benef Owne	ities icially d Following	Form: Direct (D) or Indirect	of Indirect Beneficial Ownership		
									Code	٧	Amount	(A	() or ()	Price					
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 Execution Date (Month/Day/Year) (Month/Day/Year)  3. Transaction Execution Date (Execution Date, if any (Month/Day/Year)		Oate, T	4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) or Dispo of (D) (Instr	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Date Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title Shares		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct ( or Indir (I) (Inst	Beneficial Ownership ect (Instr. 4)		

**Explanation of Responses:** 

Remarks:

/s/ Mark Kowalski 12/22/2015

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).