

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549
FORM D

Notice of Exempt Offering of Securities

OMB APPROVAL	
OMB Number:	3235-0076
Estimated average burden hours per response:	4.00

1. Issuer's Identity

CIK (Filer ID Number)	Previous Names	None	Entity Type
0001447028	0736983 B.C. Ltd.		<input checked="" type="checkbox"/> Corporation
Name of Issuer			<input type="checkbox"/> Limited Partnership
TEKMIRA PHARMACEUTICALS CORP			<input type="checkbox"/> Limited Liability Company
Jurisdiction of Incorporation/Organization			<input type="checkbox"/> General Partnership
A1			<input type="checkbox"/> Business Trust
Year of Incorporation/Organization			<input type="checkbox"/> Other (Specify)
Over Five Years Ago			
<input checked="" type="checkbox"/> Within Last Five Years (Specify Year) 2005			
<input type="checkbox"/> Yet to Be Formed			

2. Principal Place of Business and Contact Information

Name of Issuer			
TEKMIRA PHARMACEUTICALS CORP			
Street Address 1		Street Address 2	
200-8900 GLENLYON PARKWAY			
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer
BURNABY	A1	V5J 5J8	604-419-3200

3. Related Persons

Last Name	First Name	Middle Name
BRUSKIN	DR. ARTHUR	M
Street Address 1	Street Address 2	
200-8900 GLENLYON PARKWAY		
City	State/Province/Country	ZIP/PostalCode
BURNABY	A1	V5J 5J8
Relationship:	Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter <input type="checkbox"/>	

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
ABRAMS	DR. MICHAEL	J
Street Address 1	Street Address 2	
200-8900 GLENLYON PARKWAY		
City	State/Province/Country	ZIP/PostalCode
BURNABY	A1	V5J 5J8
Relationship:	Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter <input type="checkbox"/>	

Clarification of Response (if Necessary):

Last Name		First Name		Middle Name
MACLACHLAN		DR. IAN		
Street Address 1		Street Address 2		
200-8900 GLENLYON PARKWAY				
City		State/Province/Country		ZIP/PostalCode
BURNABY		A1		V5J 5J8
Relationship:		X Executive Officer	Director	Promoter

Clarification of Response (if Necessary):

Last Name		First Name		Middle Name
FORREST		MICHAEL		K
Street Address 1		Street Address 2		
200-8900 GLENLYON PARKWAY				
City		State/Province/Country		ZIP/PostalCode
BURNABY		A1		V5J 5J8
Relationship:		Executive Officer X	Director	Promoter

Clarification of Response (if Necessary):

Last Name		First Name		Middle Name
MURRAY		DR. MARK		J
Street Address 1		Street Address 2		
200-8900 GLENLYON PARKWAY				
City		State/Province/Country		ZIP/PostalCode
BURNABY		A1		V5J 5J8
Relationship:		X Executive Officer	Director	Promoter

Clarification of Response (if Necessary):

Last Name		First Name		Middle Name
JEWELL		DONALD		
Street Address 1		Street Address 2		
200-8900 GLENLYON PARKWAY				
City		State/Province/Country		ZIP/PostalCode
BURNABY		A1		V5J 5J8
Relationship:		Executive Officer X	Director	Promoter

Clarification of Response (if Necessary):

Last Name		First Name		Middle Name
FRASHER		GARY		E
Street Address 1		Street Address 2		
200-8900 GLENLYON PARKWAY				
City		State/Province/Country		ZIP/PostalCode
BURNABY		A1		V5J 5J8
Relationship:		Executive Officer X	Director	Promoter

Clarification of Response (if Necessary):

Last Name		First Name		Middle Name
HUDSON		JAMES		W
Street Address 1		Street Address 2		
200-8900 GLENLYON PARKWAY				
City		State/Province/Country		ZIP/PostalCode

BURNABY

A1

V5J 5J8

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
LENNOX	R. IAN	
Street Address 1	Street Address 2	
200-8900 GLENLYON PARKWAY		
City	State/Province/Country	ZIP/PostalCode
BURNABY	A1	V5J 5J8
Relationship:	Executive Officer X Director	Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
MORTIMER	IAN	
Street Address 1	Street Address 2	
200-8900 GLENLYON PARKWAY		
City	State/Province/Country	ZIP/PostalCode
BURNABY	A1	V5J 5J8
Relationship:	X Executive Officer Director	Promoter

Clarification of Response (if Necessary):

4. Industry Group

Agriculture	Health Care	Retailing
Banking & Financial Services	Biotechnology	Restaurants
Commercial Banking	Health Insurance	Technology
Insurance	Hospitals & Physicians	Computers
Investing	X Pharmaceuticals	Telecommunications
Investment Banking	Other Health Care	Other Technology
Pooled Investment Fund	Manufacturing	Travel
Is the issuer registered as an investment company under the Investment Company Act of 1940?	Real Estate	Airlines & Airports
Yes No	Commercial	Lodging & Conventions
Other Banking & Financial Services	Construction	Tourism & Travel Services
Business Services	REITS & Finance	Other Travel
Energy	Residential	Other
Coal Mining	Other Real Estate	
Electric Utilities		
Energy Conservation		
Environmental Services		
Oil & Gas		
Other Energy		

5. Issuer Size

Revenue Range	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000

<input type="checkbox"/> \$1,000,001 - \$5,000,000	<input type="checkbox"/> \$5,000,001 - \$25,000,000
<input checked="" type="checkbox"/> \$5,000,001 - \$25,000,000	<input type="checkbox"/> \$25,000,001 - \$50,000,000
<input type="checkbox"/> \$25,000,001 - \$100,000,000	<input type="checkbox"/> \$50,000,001 - \$100,000,000
<input type="checkbox"/> Over \$100,000,000	<input type="checkbox"/> Over \$100,000,000
<input type="checkbox"/> Decline to Disclose	<input type="checkbox"/> Decline to Disclose
<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

<input type="checkbox"/> Rule 504(b)(1) (not (i), (ii) or (iii))	<input type="checkbox"/> Rule 505
<input type="checkbox"/> Rule 504 (b)(1)(i)	<input checked="" type="checkbox"/> Rule 506
<input type="checkbox"/> Rule 504 (b)(1)(ii)	<input type="checkbox"/> Securities Act Section 4(5)
<input type="checkbox"/> Rule 504 (b)(1)(iii)	<input type="checkbox"/> Investment Company Act Section 3(c)
	<input type="checkbox"/> Section 3(c)(1)
	<input type="checkbox"/> Section 3(c)(9)
	<input type="checkbox"/> Section 3(c)(2)
	<input type="checkbox"/> Section 3(c)(10)
	<input type="checkbox"/> Section 3(c)(3)
	<input type="checkbox"/> Section 3(c)(11)
	<input type="checkbox"/> Section 3(c)(4)
	<input type="checkbox"/> Section 3(c)(12)
	<input type="checkbox"/> Section 3(c)(5)
	<input type="checkbox"/> Section 3(c)(13)
	<input type="checkbox"/> Section 3(c)(6)
	<input type="checkbox"/> Section 3(c)(14)
	<input type="checkbox"/> Section 3(c)(7)

7. Type of Filing

☒ New Notice Date of First Sale 2008-12-09 First Sale Yet to Occur
☐ Amendment

8. Duration of Offering

Does the Issuer intend this offering to last more than one year? Yes ☒ No

9. Type(s) of Securities Offered (select all that apply)

<input type="checkbox"/> Equity	<input type="checkbox"/> Pooled Investment Fund Interests
<input type="checkbox"/> Debt	<input type="checkbox"/> Tenant-in-Common Securities
<input checked="" type="checkbox"/> Option, Warrant or Other Right to Acquire Another Security	<input type="checkbox"/> Mineral Property Securities
<input type="checkbox"/> Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security	<input type="checkbox"/> Other (describe)

10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer? Yes ☒ No

Clarification of Response (if Necessary):

11. Minimum Investment

Minimum investment accepted from any outside investor \$0 USD

12. Sales Compensation

Recipient	Recipient CRD Number <input checked="" type="checkbox"/> None
(Associated) Broker or Dealer <input checked="" type="checkbox"/> None	(Associated) Broker or Dealer CRD Number <input checked="" type="checkbox"/> None
Street Address 1	Street Address 2
City	State/Province/Country
State(s) of Solicitation (select all that apply)	ZIP/Postal Code
<input type="checkbox"/> All States	<input type="checkbox"/> Foreign/non-US

Check “All States” or check individual States

13. Offering and Sales Amounts

Total Offering Amount USD or X Indefinite
Total Amount Sold \$0 USD
Total Remaining to be Sold USD or X Indefinite

Clarification of Response (if Necessary):

125,000 options at CDN\$0.36 (US\$0.29 based on exchange rate in New York on Dec 9/08 of \$1.2602). The options have nominal value and have been issued as incentives pursuant to a stock option plan. No options have been exercised.

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering.
Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

1

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions \$0 USD Estimate
Finders' Fees \$0 USD Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on Rule 505 for one of the reasons stated in Rule 505(b)(2)(iii).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
TEKMIRA PHARMACEUTICALS CORP	/s/ Ian Mortimer	IAN MORTIMER	EXECUTIVE VICE PRESIDENT & CHIEF FINANCIAL OFFICER	2009-03- 20

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.