SEC Form 4	
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FORM 4

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

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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 [*] BOYLE J DAVID II				2. Issuer Name and Ticker or Trading Symbol <u>AVI BIOPHARMA INC</u> [AVII]							(Check	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner										
(Last) (First) (Middle) 4575 SW RESEARCH WAY, SUITE 200				3. Date of Earliest Transaction (Month/Day/Year) 02/09/2010								X Officer (give title Other (specify below) CFO										
(Street) CORVALLIS OR			97333		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indiv X	, , ,									
(City) (State) (Z			(Zip)										Form filed by More than One Reporting Person									
			Table I - Nor					-	Disp	1		-	1									
			2. Transa Date (Month/E		r) if any	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)						
								Code	v	Amount	(A) or (D)	Price	(Instr. 3 and	d`4)́								
Common Stock													65,2	82	D							
			Table II - I (sed of, or onvertible			/ned									
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	4. Transa Code) 8)		Dispos	ive	Expiration D		Expiration Dat		6. Date Exercisable and Expiration Date (Month/Day/Year)		te	7. Title and of Securiti Underlying Derivative (Instr. 3 an	es J Security	Derivative Security	9. Number of derivative Securities Beneficially Owned Following		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial) Ownership ct (Instr. 4)	
				Code	v	(A)	(D)	Date Exercis	Expiration Amount Tr. or (In Number		Reporte Transac (Instr. 4)	action(s)										
Incentive Stock Option (right to buy)	\$1.45	02/09/2010		A		97,241		02/09/2011 ⁽¹⁾		02/09/2020	Common Stock	97,241	\$0 ⁽²⁾	97,2	41	D						
Non- Qualified Stock Option (right to buy)	\$1.21	02/09/2010		J			150,000 ⁽³⁾	08/18/2008 ⁽⁴⁾		08/18/2018	Common Stock	150,000	\$0	102,068		D						
Non- Qualified Stock Option (right to buy)	\$1.45	02/09/2010		A		82,759		02/09/20)11 ⁽¹⁾	02/09/2020	Common Stock	82,759	\$0 ⁽²⁾	82,759		82,759		82,759		D		
Incentive Stock Option (right to buy)	\$0.92							02/10/20)10 ⁽¹⁾	02/10/2019	Common Stock	50,000		50,0	50,000		00 D					
Incentive Stock Option (right to buy)	\$1.21							08/18/20)08 ⁽⁴⁾	08/18/2018	Common Stock	247,932		247,932		D						
Non- Qualified Stock Option (right to buy)	\$0.92							02/10/20)10 ⁽¹⁾	02/10/2019	Common Stock	100,000		100,0	100,000 D							

Explanation of Responses:

1. The Stock Option Grant vest as follows: 1/3 vest one year from date of grant and 1/3 each year thereafter until all shares vest three years from grant date.

2. Price not required on initial report of stock option granted.

3. Cancellation of 150,000 shares due to performance goals not met according to grant agreement.

4. The options vest in equal annual installments over three years beginning on August 18, 2008.

John David Boyle II

** Signature of Reporting Person

02/11/2010 Date

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

 \ast 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.