FORM 4

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

Washington, D.C. 20549

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STATEMENT	OF CHANGE	S IN BENEFIC	IAL OWNERSHIP

l	OMB APPRO	VAL						
l	OMB Number:	3235-0287						
	Estimated average burden							
	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

L. Name and Address of Reporting Person*  BEHRENS M KATHLEEN					2. Issuer Name <b>and</b> Ticker or Trading Symbol AVI BIOPHARMA INC [ AVII ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
BEHRENS WI KAIHLEEN														X Dire	ctor		10% Ow	/ner	
(Last) 3450 M(	•	irst) LA PARKWAY,	(Middle) SUITE 101			Date of Earliest Transaction (Month/Day/Year) /08/2010								Offic belo	er (give title w)		Other (s below)	pecify	
					4.1	If Ame	endment,	Date	of Original F	Filed	(Month/Day	//Year)	6.	ndividual o	r Joint/Group	o Filing	(Check App	licable	
(Street) BOTHE	LL W	⁄A	98021											X Form filed by One Reporting Person					
(City)	(S	tate)	(Zip)		-									Form filed by More than One Reportir Person					
		Tol	blo I Non	Dori	votiv	o C o	ouritio.	- A	auirad	Dia	20004 0	f or Bo	aoficio	Ily Own					
			ble I - Non						<del>-</del>	וצוט	1	-							
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction D Code (Instr. 5		4. Securit Disposed 5)	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)		d Secu Bene Owne	icially d Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price	Trans	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock <sup>(1)</sup> 06/08					8/201	3/2010			A		5,000	A	\$0		5,000		D		
			Table II - [											/ Owne	ļ				
			(	e.g., p	outs,	call	s, warı	ants	s, option	s, c	onvertib	le secu	rities)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	ate,	4. 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title an of Securit Underlyin Derivative (Instr. 3 at			ties g e Security	Derivati Security	derivativ Securitie	re es ally g d tion(s)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
													Amoun	-					
										١.			or Number	.					
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	of Shares						
Non- Qualified Stock Option (right to buy)	\$1.3	06/08/2010			A		30,000		06/08/2011	(2)	06/08/2020	Common Stock	30,000	\$0	30,00	00	D		
Non- Qualified Stock Option (right to	\$0.66								03/31/2010	(3)	03/31/2019	Common Stock	60,000	)	60,00	00	D		

## **Explanation of Responses:**

- 1. This is a restricted stock award that will vest on the earlier of (i) the anniversary of the grant date or (ii) the date of the Annual Meeting in the year following the date of grant.
- 2. This option will vest on the earlier of (i) the anniversary date of the grant or (ii) the date of the Annual Meeting in the year following the date of grant.
- $3. \ Vesting: 25\% \ of the \ shares \ vest \ each \ year \ from \ the \ date \ of \ grant \ with \ all \ shares \ vesting \ in \ four \ years.$

By: Melinda Miles For:
Kathleen Bhrens

06/09/2010

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.