

NOVELION THERAPEUTICS INC.

Reported by
CHAN BARBARA Y

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 03/26/18 for the Period Ending 03/15/18

Telephone	(877) 764-3131
CIK	0000827809
Symbol	NVLN
SIC Code	2834 - Pharmaceutical Preparations
Industry	Biotechnology & Medical Research
Sector	Healthcare
Fiscal Year	12/31

FORM 4

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

OMB APPROVAL
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *		2. Issuer Name and Ticker or Trading Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)	
Chan Barbara Y		NOVELION THERAPEUTICS INC. [NVLN]		<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) See Remarks	
(Last) (First) (Middle) C/O NOVELION THERAPEUTICS INC., 1800-510 WEST GEORGIA STREET		3. Date of Earliest Transaction (MM/DD/YYYY) 3/15/2018			
(Street) VANCOUVER, A1 V6B 0M3		4. If Amendment, Date Original Filed (MM/DD/YYYY)		6. Individual or Joint/Group Filing (Check Applicable Line)	
(City) (State) (Zip)				<input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> 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. Trans. Date	2A. Deemed Execution Date, if any	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Common Shares	3/15/2018		A		8600 (1) (2)	A	\$0	22384	D	

Table II - Derivative Securities Beneficially Owned (e.g. , puts, calls, warrants, options, convertible securities)

1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$4.52 (3)	3/15/2018		A		40000		(4)	3/15/2028	Common Shares	40000	\$0	40000	D	

Explanation of Responses:

- (1) These shares are issuable pursuant to a grant of restricted stock units. Each restricted stock unit represents a contingent right to receive one share of common stock of the Issuer.
- (2) The restricted stock units vest in three equal annual installments beginning March 15, 2019.
- (3) Each option has an exercise price equal to the closing price of a common share of the Issuer on the Nasdaq Global Select Market on the grant date.
- (4) This stock option will vest and become exercisable in three equal annual installments beginning March 15, 2019.

Remarks:

President and Chief Accounting Officer of Aegerion Pharmaceuticals, Inc.

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Chan Barbara Y C/O NOVELION THERAPEUTICS INC. 1800-510 WEST GEORGIA STREET VANCOUVER, A1 V6B 0M3			See Remarks	

Signatures

/s/ Jennifer Fitzpatrick, attorney-in-fact

3/23/2018

**Signature of Reporting Person

Date

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.

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