

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL	
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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

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* <u>Bayley Matthew D</u> (Last) (First) (Middle) C/O AEVI GENOMIC MEDICINE, INC. 435 DEVON PARK DRIVE, SUITE 715 (Street) WAYNE PA 19087 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Aevi Genomic Medicine, Inc. [GNMX]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 06/14/2018	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction 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			

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 (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction 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 (Month/Day/Year)		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: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					(A)	(D)	Date Exercisable	Expiration Date						Title
Stock Option (Right to Purchase)	\$1.55	06/14/2018 ⁽¹⁾		A	50,000		(2)	04/17/2028	Common Stock	50,000	\$0	50,000	D	

Explanation of Responses:

- The option award was granted on April 17, 2018 and was subject to forfeiture if stockholder approval of a proposed amendment to the Issuer's stock incentive plan to increase the number of shares reserved for issuance under the plan was not obtained. The Issuer's stockholders approved the amendment to the Issuer's stock incentive plan at the Issuer's annual meeting of stockholders on June 14, 2018.
- The option award vests and becomes exercisable as follows (rounded up to the nearest whole share of common stock): one-third on April 17, 2019, then in 24 equal monthly installments on the 17th day of each subsequent calendar month, subject to the reporting person's continued service with the Issuer. The reporting person is the Chief Strategy Officer at The Children's Hospital of Philadelphia and he holds this option award for the benefit of The Children's Hospital of Philadelphia Foundation.

Remarks:

/s/ Brian D. Piper as Attorney-in-Fact for Matthew D. Bayley 06/19/2018

** 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.

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.