

OMB APPROVAL	
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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

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

1. Name and Address of Reporting Person* <u>ESHELMAN FREDRIC N</u> <hr/> (Last) (First) (Middle) <u>C/O ARAVIVE, INC., RIVER OAKS TOWER,</u> <u>3730 KIRBY DRIVE, SUITE 1200</u> <hr/> (Street) <u>HOUSTON TX 77098</u> <hr/> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Aravive, Inc. [ARAV]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>09/10/2021</u>	
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 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)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Stock Option	\$3.97	09/10/2021		A		22,812		10/10/2021 ⁽¹⁾	09/09/2031	Common Stock	22,812	\$0	22,812	D	

1. Name and Address of Reporting Person* <u>ESHELMAN FREDRIC N</u> <hr/> (Last) (First) (Middle) <u>C/O ARAVIVE, INC., RIVER OAKS TOWER,</u> <u>3730 KIRBY DRIVE, SUITE 1200</u> <hr/> (Street) <u>HOUSTON TX 77098</u> <hr/> (City) (State) (Zip)
1. Name and Address of Reporting Person* <u>Eshelman Ventures, LLC</u> <hr/> (Last) (First) (Middle) <u>C/O ARAVIVE, INC., RIVER OAKS TOWER,</u> <u>3730 KIRBY DRIVE, SUITE 1200</u> <hr/> (Street) <u>HOUSTON TX 77098</u> <hr/> (City) (State) (Zip)

Explanation of Responses:

1. These options vest pro rata on a monthly basis commencing on October 10, 2021 for the next 12 months with full vesting, if not fully vested at such time, on the date of Aravive, Inc.'s next annual meeting of stockholders.

Remarks:

Dr. Fredric Eshelman is the Chairman of the Board of Directors of Aravive, Inc. and is the founder and principal of Eshelman Ventures, LLC.

/s/ ESHELMAN VENTURES, LLC, By: /s/ Fredric N. Eshelman, Name: Fredric N. Eshelman, Title: Managing Member 09/13/2021

/s/ Fredric N. Eshelman

09/13/2021

** 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.