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 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

Print or Ty	pe Responses	s)														
1. Name and Address of Reporting Person* Bejar Rafael					2. Issuer Name and Ticker or Trading Symbol Aptose Biosciences Inc. [APTO]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O APTOSE BIOSCIENCES INC., 251 CONSUMERS ROAD, SUITE 1105					3. Date of Earliest Transaction (Month/Day/Year) 11/19/2021						X Officer (give title below) Other (specify below) Sr. VP, Chief Medical Officer					
(Street)				4. I	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
TORONTO, A6 M2J 4R3 (City) (State) (Zip)					Table I - Non-Derivative Securities Acqui							ired Disposed of or Reneficially Owned				
(Instr. 3)			2. Transaction Date (Month/Day/Y	Exe	. Deemed ecution Date, if	3. Transaction Code (Instr. 8)		on 4. Securities Acquired			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			6. Ownership Form:	7. Nature of Indirect Beneficial	
				(Mo	(Month/Day/Year)	Code	V	Amoun	(A) or (D)	Price	(Instr. 3 a	Instr. 3 and 4) Direct (D) or Indirect (I) (Instr. 4)			Ownership (Instr. 4)	
Common	Shares		11/19/2021			P		10,000		\$ 2.56	10,000			D		
			Table I		vative Securiti , puts, calls, wa						ly Owned					
	2. Conversion or Exercise Price of Derivative	3. Transaction	3A. Deeme Execution any	I - Deri (e.g., ed Date, if	vative Securiti puts, calls, wa 4. f Transaction Code () (Instr. 8)	es Acquire	Pers cont the f ed, Di tions,	ons whained in	or resport this for splays a coof, or Bentible securitisable on Date	eficial rities) 7. Ti Amo Und Secu	not requestly valid	OMB conf	9. Number Derivative Securities Beneficially	of 10. Owners: Form of	ve Ownership	
	Security					Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	uired or posed D) cr. 3,				r. 3 and		Following Reported Transaction((Instr. 4)	Direct (I or Indire	D) ect	
					Code V	(A) (D)	Date Exer	cisable	Expiration Date	1 Title	Amount or Number of Shares					
Repor	ting O	wners														
						Relation	ships	s								
Reporting Owner Name / Address Direct				rector	or 10% Officer					Ot	ther					

Sr. VP, Chief Medical Officer

Signatures

TORONTO, A6 M2J 4R3

Bejar Rafael

/s/ Janet Clennett as attorney-in-fact for Rafael Bejar	11/19/2021		
**Signature of Reporting Person	Date		

Owner

Explanation of Responses:

C/O APTOSE BIOSCIENCES INC.

251 CONSUMERS ROAD, SUITE 1105

- * 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.