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

FORM 8-K

CURRENT REPORT
Pursuant to Section 13 or Section 15(d) of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): **March 10, 2026**

ANIXA BIOSCIENCES, INC.
(Exact name of registrant as specified in its charter)

Delaware	**001-37492**	**11-2622630**
(State or other jurisdiction of incorporation)	(Commission File Number)	(IRS Employer Identification No.)

3150 Almaden Expressway, Suite 250 San Jose, CA	**95118**
(Address of principal executive offices)	(Zip Code)

Registrant's telephone number, including area code: **(408) 708-9808**

(Former name or former address, if changed since last report)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation to the registrant under any of the following provisions:

☐ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

☐ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

☐ Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

☐ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	**Trading Symbol(s)**	**Name of each exchange on which registered**
Common Stock, par value $0.01 per share	ANIX	The NASDAQ Stock Market LLC

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter).

Emerging growth company ☐

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. ☐

Item 5.07 Submission of Matters to a Vote of Security Holders.

On March 10, 2026, Anixa Biosciences, Inc. (the "Company") completed its 2026 annual meeting of stockholders (the "Annual Meeting"). The number of shares of stock entitled to vote at the Annual Meeting was 33,379,505 shares of common stock (the "Voting Stock"). The number of shares of Voting Stock present or represented by valid proxy at the Annual Meeting was 20,805,324 shares. At the Annual Meeting, the Company's stockholders (i) re-elected Dr. Amit Kumar, Dr. Arnold Baskies, Emily Gottschalk, and Lewis H. Titterton, Jr. as directors, (ii) approved, on a non-binding, advisory basis, the Company's executive compensation, and (iii) ratified the appointment of Haskell & White LLP as the Company's independent registered public accounting firm for the fiscal year ending October 31, 2026. The following is a tabulation of the voting on the proposals presented at the Annual Meeting:

Proposal No. 1 - Election of directors

Dr. Amit Kumar, Dr. Arnold Baskies, Emily Gottschalk, and Lewis H. Titterton, Jr. were each re-elected to serve until the 2027 annual meeting of stockholders or until their successors are elected and qualified or until their earlier resignation or removal. The voting results were as follows:

Nominee	Shares Voted For	Shares Withheld	Broker Non-Vote
Dr. Amit Kumar	8,917,813	218,238	11,669,273
Dr. Arnold Baskies	7,425,900	1,710,151	11,669,273
Emily Gottschalk	7,249,290	1,886,761	11,669,273
Lewis H. Titterton, Jr.	7,176,739	1,959,312	11,669,273

Proposal No. 2 - Approval, by non-binding advisory vote, of the Company's executive compensation

The Company's executive compensation, by non-binding advisory vote, was approved. The voting results were as follows:

Votes For	Votes Against	Abstentions	Broker Non-Votes
6,025,247	2,973,752	137,032	11,669,273

Proposal No. 3 - Ratification of the appointment of independent registered public accounting firm

The appointment of Haskell & White LLP as the Company's independent registered public accounting firm for the fiscal year ending October 31, 2026 was ratified. The voting results were as follows:

Shares Voted For	Shares Voted Against	Shares Abstaining	Broker Non-Vote
20,426,524	191,432	187,368	-

Item 7.01 Regulation FD Disclosure.

Attached as Exhibit 99.1 to this Current Report is the form of presentation of the Company which was used by management at its Annual Meeting. This presentation may be used by the Company in the future at meetings with investors, analysts or others, in whole or in part and possibly with modifications from time to time.

Item 9.01. Financial Statements and Exhibits

(d) Exhibits

The following exhibits are filed with this Current Report on Form 8-K:

Exhibit No.	Description
99.1	Presentation
104	Cover Page Interactive Data File (embedded within the Inline XBRL document).

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

Dated: March 11, 2026

ANIXA BIOSCIENCES, INC.

By: */s/ Michael J. Catelani*
Name: Michael J. Catelani
Title: President, Chief Operating Officer and Chief Financial Officer

Exhibit 99.1

Forward-Looking Statements

Statements that are not historical fact may be considered forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. Forward-looking statements are not statements of historical facts, but rather reflect Anixa Biosciences' current expectations concerning future events and results. We generally use the words "believes," "expects," "intends," "plans," "anticipates," "likely," "will" and similar expressions to identify forward-looking statements. Such forward-looking statements, including those concerning our expectations, involve risks, uncertainties and other factors, some of which are beyond our control, which may cause our actual results, performance or achievements, or industry results, to be materially different from any future results, performance, or achievements expressed or implied by such forward-looking statements. These risks, uncertainties and factors include, but are not limited to, those factors set forth in "Item 1A – Risk Factors" and other sections of our most recent Annual Report on Form 10-K as well as in our Quarterly Reports on Form 10-Q and Current Reports on Form 8-K. We undertake no obligation to publicly update or revise any forward-looking statements, whether as a result of new information, future events or otherwise, except as required by law. You are cautioned not to unduly rely on such forward-looking statements when evaluating the information presented herein.

Presentation Outline

I. Strategy

II. Current Projects Update
   A. 2025 Achievements and Current Status
   B. 2026 Goals

III. Q&A

Corporate Strategy

I. **Corporate Strategy**

A. **Maintain Low Cash Burn**
- Less Shareholder Dilution
- Lower Capital Requirements
- Clean Capital Structure

B. **Partnership Based R&D**
- No Expensive Laboratory Facilities- Utilize Laboratory Facilities of Partners
- Low Headcount- Full time HC of 4
- Diversify Product Portfolio

C. **Partnerships for Commercialization**
- Conserve Cash and Advance Commercialization
  - We do not plan to build Manufacturing, Marketing, Sales, Distribution, *etc.*
- Earlier Monetization of Programs

Capital Efficient Business Model

$14M Cash and short-term investments as of January 31, 2026

~$5-7M Approximate annual cash burn since 2017

33M Common shares outstanding as of January 31, 2026

No debt

No warrants, no preferred stock

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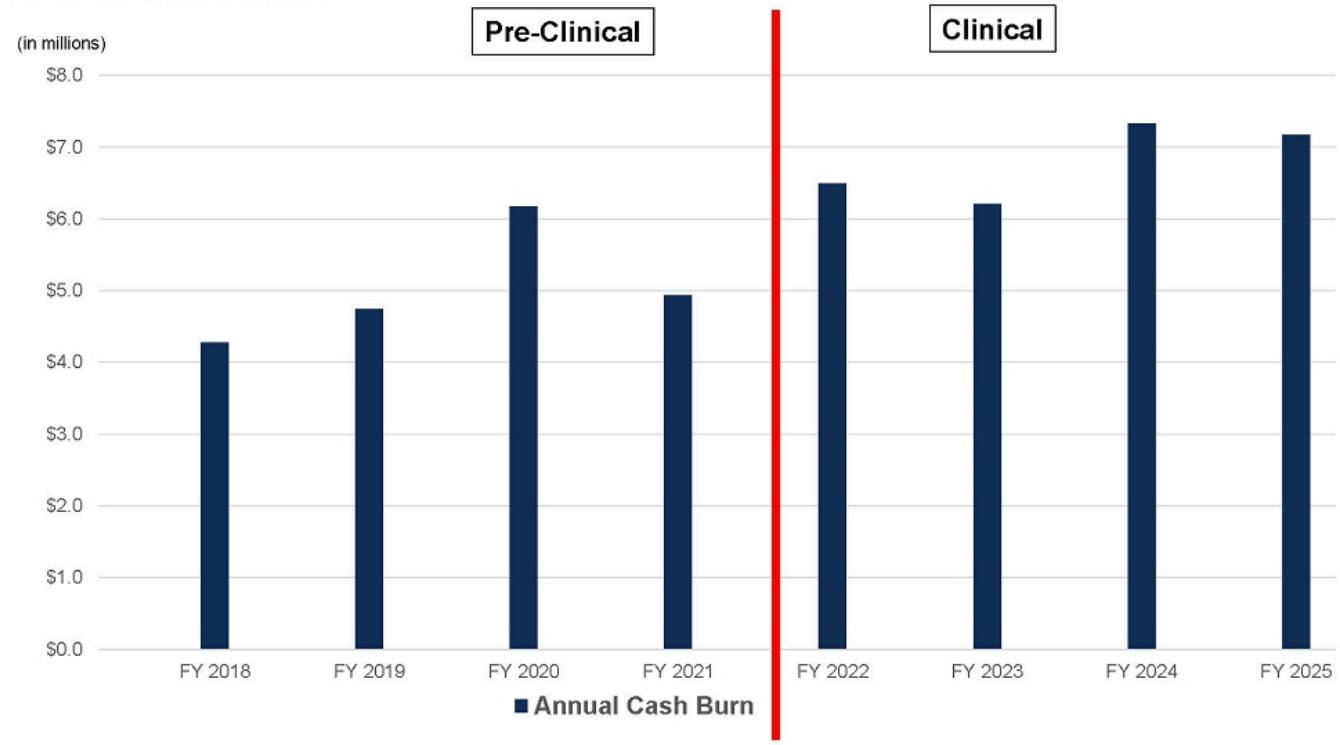
Annual Cash Burn

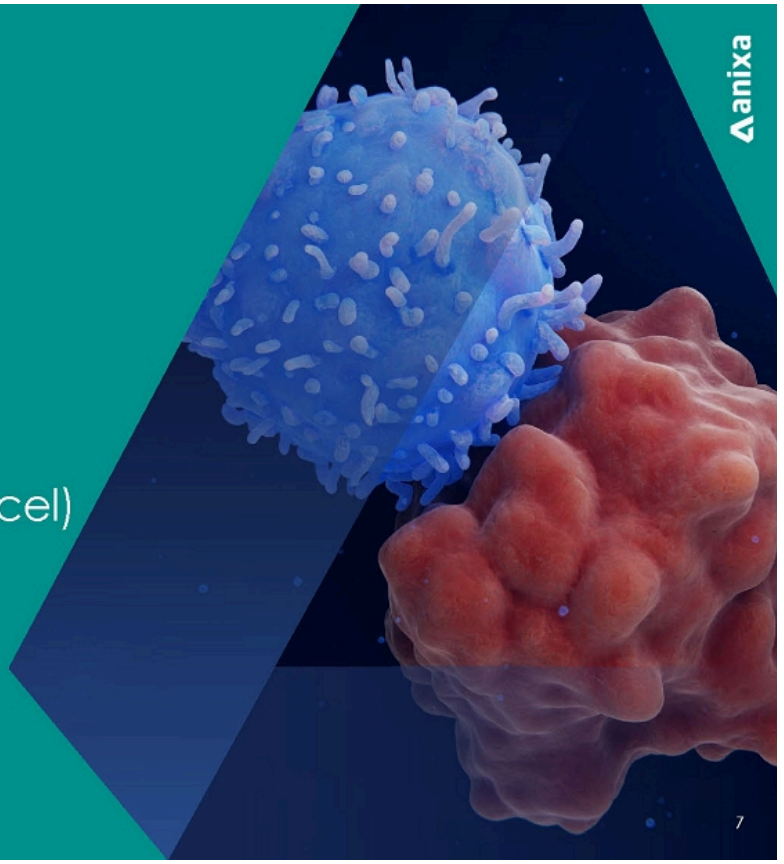


Clinical Programs & Development Partnerships

THERAPEUTIC AREA	MECHANISM OF ACTION	INDICATION	GEOGRAPHIC RIGHTS	STAGE	UPCOMING MILESTONES	PARTNERS
Oncology	**CAR-T Therapeutic**	Ovarian Cancer / Other Solid Tumors	Global	Phase 1	Periodic data releases (enrollment based)	MOFFITT CANCER CENTER, THE WISTAR INSTITUTE
Oncology	**Vaccine Therapeutic**	Breast Cancer	Global	Phase 1 completed	Phase 2 enrollment	Cleveland Clinic
Oncology	Vaccine	Ovarian Cancer	Global	Pre-clinical	Initiate IND enabling studies	Cleveland Clinic, NIH NATIONAL CANCER INSTITUTE
Oncology	Vaccine	Lung, Colon, Prostate	Global	R&D	Pre-clinical Data	Cleveland Clinic

CAR-T Program

Ovarian Cancer Therapy
Liraltagene autoleucel (Lira-cel)



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Ovarian Cancer CAR-T Therapy

CAR-T Technology has demonstrated Success in Liquid Tumors but no approvals in Solid Tumors

Background

- Unique CAR-T designed for a solid tumor
- Utilizes three unique attributes
  - Targets Unique Protein Target
  - Utilizes anti-angiogenic effect
  - Intraperitoneal Administration
- Trial Targets Recurrent Ovarian Cancer Patients who have no other options

2025- Achievements

- Treated Patients in the 3rd and 4th Dose Cohorts
- Continued to Observe Positive Safety and Tolerability at all Doses
- Strong Clinical Efficacy Signals
- Received International and Domestic Approval of Generic Name for Therapy- Liraltagene Autoleucel, or Lira-Cel
- Dose Escalation Approved to Highest Dose Ever for any Approved CAR-T

Dose-escalation first-in-human clinical trial in recurrent/chemoresistant ovarian cancer

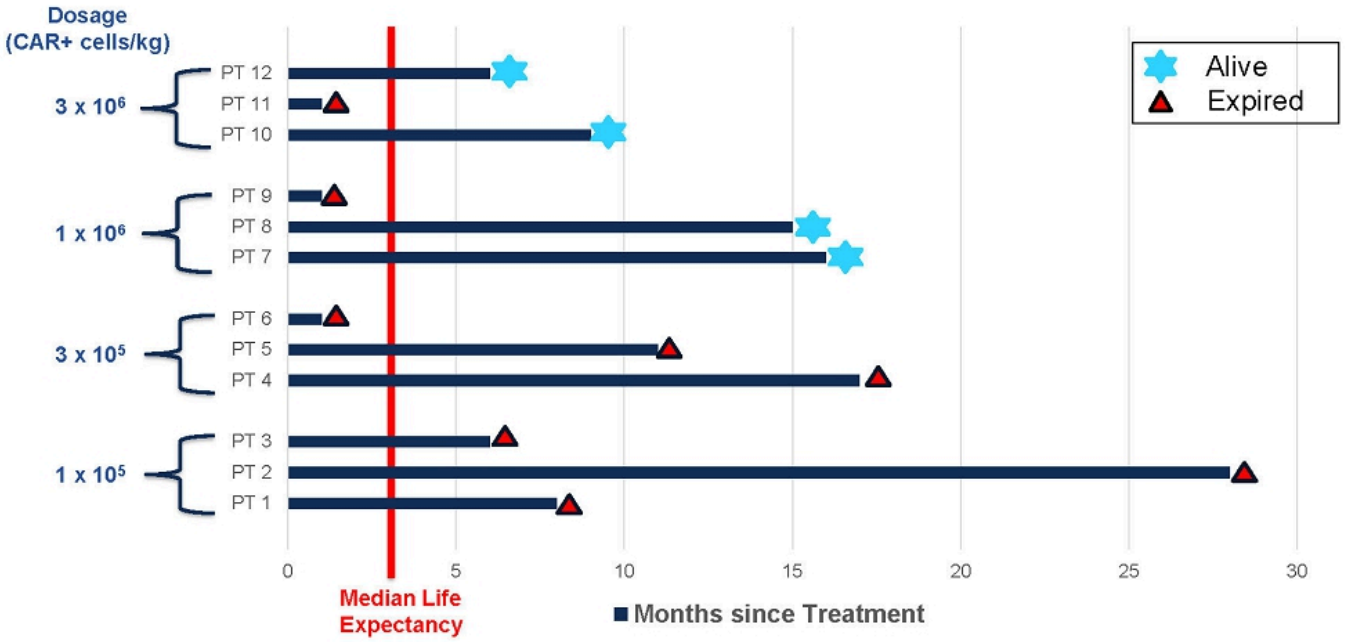
- PI: R. Wenham, MD Chair, Gynecologic Oncology Program Moffitt Cancer Center
- I.P. *vs.* I.V.→ Comparative safety and effectiveness

Table 1. Dose-escalation scheme.

Cohort	Dose Level	Cyclophosphamide dose	FSHCER T-cell Dose	Number of Patients
1	1	None	1×10^5 cells/kg	3-6 patients
2	2	None	3×10^5 cells/kg	3-6 patients
3	3	None	1×10^6 cells/kg	3-6 patients
4	4	None	3×10^6 cells/kg	3-6 patients
5	5	Cyclophosphamide 500 mg/m^2 and fludarabine (30 mg/m^2) × 3 days	1×10^7 cells/kg	3-6 patients
6	6	Cyclophosphamide 500 mg/m^2 and fludarabine (30 mg/m^2) × 3 days	1×10^8 cells/kg	3-6 patients
7	7	Cyclophosphamide 500 mg/m^2 and fludarabine (30 mg/m^2) × 3 days	1×10^9 cells/kg	3-6 patients

Current dosage ←

Lira-cel CAR-T Treatment: Recurrent Ovarian Cancer Patients- March 2026



Lira-Cel CAR-T - 2026 Goals

- Lymphodepletion- Understand the benefit and need for lymphodepletion
- Continue dose escalation- Dose Cohort 5 and 6
- Continue monitoring increase in patient survival
- Scientific Presentation of results
- Additional IP Prosecution and Grants
- Pharma Partner Discussions

Vaccine Program

Breast Cancer

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Breast Cancer Vaccine

Background

- Vaccine uses a molecular mechanism that has never been utilized
- Designed to
  - Treat Breast Cancer in neo-adjuvant setting as well as adjuvant setting (Therapeutic)
  - Prevent Recurrence
  - Prophylactically prevent Breast Cancer (Primary Prevention)
- Three shot vaccination process
- Current Focus is Triple Negative Breast Cancer (TNBC), but is expected to be effective for other subtypes

2025- Achievements

- Completed Phase 1 Trial at Cleveland Clinic
- Presented Positive Results at San Antonio Breast Cancer Symposium
- Submitted DOD report
- Submitted Preliminary FDA Report
- Transferred IND from partner Cleveland Clinic to Anixa
- Began Planning and Preparing for Phase 2
- Executed Additional Agreements to Conduct Further Research at Cleveland Clinic for this Vaccine
- Submitted Additional Grant Applications with Cleveland Clinic

Phase 1 Trial

Conducted by Cleveland Clinic, funded by U.S. Department of Defense (DOD)

An open-label Phase 1 dose-escalation trial

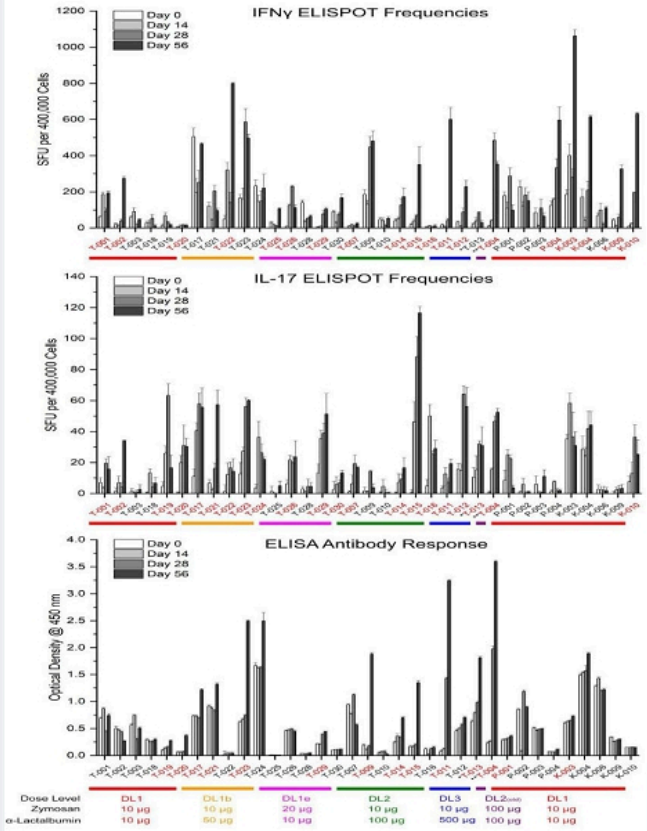
Design	Cohort 1a (Recurrence Group)	Cohort 1b (Prevention Group)	Cohort 1c (Treatment Group)
Participants will receive three vaccinations, each two weeks apart, and will be closely monitored for side effects and immune response	▪ 24-36 Patients who have been treated for TNBC ▪ Safety will be monitored ▪ Immune Response will be monitored ▪ Maximum Tolerated Dose ("MTD") determined	▪ Healthy women w/mutations ▪ Chosen to undergo prophylactic mastectomy ▪ Vaccinate before surgery and evaluate immune response and resected tissue ▪ **Unique opportunity to garner supplemental data after studying breast tissue to determine if T cells are surveilling the tissue without any visible cancer tumors**	▪ **Additional cohort combining vaccine with Keytruda** ▪ Patients treated for TNBC ▪ Combine Keytruda w/ vaccine to evaluate if there is synergy

Cleveland Clinic DOD

Positive Phase 1 Clinical Results
All Major Endpoints Met

- 35 patients dosed
- 26 TNBC patients who have undergone standard of care, but are at risk of recurrence (40-80% recur in 5 years)— cohort 1a
- 4 genetic risk patients choosing prophylactic mastectomies— cohort 1b
- 5 patients with residual disease taking Keytruda— cohort 1c

- **Key Findings Presented at SABCS 2025**
  - MTD reached: 10 µg α-lactalbumin/10 µg Zymosan
  - No safety concerns
  - Immune responses observed at all dose levels: 4 of 6 patients at the MTD exhibited a positive immune response
  - 74% had protocol specified immune response
  - Intensity of other responses varied
  - Keytruda Plus Vaccine exhibited no additional adverse side effects, enabling combination use
- **Phase 1 Status: Completed**
- **Study Report submitted to FDA December 2025**
- **Transfer of IND sponsorship to Anixa successful**



Phase 2 Breast Cancer Vaccine Trial

Near Term- Therapeutic Approach

Phase 2 trial in neo-adjuvant setting – before surgery

- Faster evaluation of efficacy
- Multiple types of Breast Cancer
- Faster data, enabling earlier alliance with big Pharma

Two Arms

- Standard of Care + Vaccine
- Standard of Care only (chemotherapy and/or immunotherapy, such as Keytruda)

Breast Cancer Vaccine- 2026 Goals

- Manufacturing (production of vaccine, fill and finish, quality control)
- FDA Report
- FDA Meetings
- Phase 2 Trial Protocol
- Site Selection, sign-up and Training, in addition to Cleveland Clinic
- Publications
- Additional Presentations
- Additional IP Prosecution and Grants
- Pharma Partner Discussions

Pre-Clinical Pipeline

Ovarian, Lung, Prostate, Colon

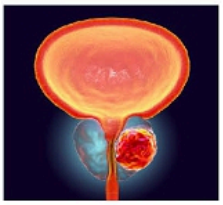
Collaboration with Cleveland Clinic and the National Cancer Institute

Driven by current promising data from Breast Cancer Vaccine Clinical Trial

Maintain our Lead in Prophylactic Cancer Vaccine Development

Ovarian

Lung



Prostate

Colon

Development of Additional Cancer Vaccines

- **Bioinformatic analysis utilizing advanced AI and supercomputing capabilities**
- **Pre-clinical studies to verify and validate antigen targets**
- **Animal studies to establish proof of concept**
- **Clinical Development**

2026 Goals

2026 Goals

CAR-T

- Lymphodepletion- Understand the benefit and need for lymphodepletion
- Continue dose escalation- Dose Cohort 5 and 6
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Pre-clinical Programs

- Continue progress of Ovarian Cancer Vaccine in partnership with Cleveland Clinic and NCI
- Identification of Targets to Prevent and Treat Cancer in partnership with Cleveland Clinic

Breast Cancer Vaccine

- Manufacturing (production of vaccine, fill & finish, quality control)
- FDA Report
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