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

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Name and Address of Reporting Person Gottschalk Emily			2. Issuer Name and Ticker or Trading Symbol Anixa Biosciences Inc [ANIX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner					
(Last) (First) (Middle) C/O ANIXA BIOSCIENCES, INC., 3150 ALMADEN EXPRESSWAY, SUITE 250			3. Date of Earliest Transaction (Month/Day/Year) 07/15/2021					Office	r (give title belo	w)	Other (specify b	elow)		
(Street) SAN JOSE,, CA 95118			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
	(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					Acqui	ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		1	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, it	(Instr. 8)	(4	(A) or Disposed of (Instr. 3, 4 and 5)		f (D) Benefici Reported		ant of Securities ally Owned Following d Transaction(s)		Ownership Form:	Beneficial
				(Month/Day/Year	Code	VA	V Amount (A) o		Price	(Instr. 3 a	3 and 4)		\ /	Ownership (Instr. 4)
Common	Stock		07/15/2021		P	2	20,065		§ 3.96	45,665			D	
Reminder:	Report on a s	separate line for	each class of secur	rities beneficially o	wned direc	Persor	ns who	respon			ction of inf			1474 (9-02)
Reminder:	Report on a s	separate line for	Table II - I	Derivative Securit	ies Acquir	Persor contain the for	ns who ned in m disp	respon this for plays a c	m are currer	not requ ntly valid	uired to res	ormation spond unle trol numbe	ss	1474 (9-02)
1. Title of Derivative Security		3. Transaction	Table II - I (3A. Deemed Execution Date any	Derivative Securities, puts, calls, was te, if Transaction Code Year) (Instr. 8)	ies Acquir arrants, oj	Persor contain the for ed, Disp otions, co 6. Date and Ex (Month	ns who ned in m disp	o respon this for plays a conf. or Bene- ble secur sable in Date	eficiallities) 7. Ti Amo Unde	not requ ntly valid	OMB conf	spond unle	of 10. Ownersh Form of Derivatir Security Direct (I or Indire	11. Nation of Indirection Benefic Owners: (Instr. 4)

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Gottschalk Emily C/O ANIXA BIOSCIENCES, INC. 3150 ALMADEN EXPRESSWAY, SUITE 250 SAN JOSE,, CA 95118	X				

Signatures

/s/ Emily Gottschalk	07/16/2021
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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.