## FORM 3

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

wasnington, D.C. 20549

# INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL
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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 Type Responses)									
1. Name and Address of Reporting	, ,			· ·	uer Name and Ticker or Trading Symbol				
Person *	Statement (Month/Day			ITUS Corp	ITUS Corp [ITUS]				
Fox Dale	08/08	11/Day/1 cai 3/2014	.)						
(Last) (First) (Middle C/O ITUS CORPORATION, 96 WALT WHITMAN ROAD	:)	,,2011		Person(s) to I (Check	all applicable)		5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) MELVILLE, NY 11747				X Director Officer (gi title below)	ve Other below)	er (specify 6. Indivi Filing(Ct _X_ Form		idual or Joint/Group heck Applicable Line) filed by One Reporting Person filed by More than One Person	
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned							
1.Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
No securities are beneficially owned		0	0		D				
	respond to	o the colle	ection	eficially owned dire	contained in	this fo		SEC 1473 (7-02)	
Table II - Derivative Se	ī		wned	(e.g., puts, calls, v			nvertibl	e securities)	
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable and Expiration Date (Month/Day/Year)		ion Date	Secu	tle and Amount of rities Underlying vative Security r. 4)	4. Conversio or Exercise Price of	n Own Fori	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Numbor Shares	Derivative Security	Dire or II (I)	urity: ect (D) ndirect tr. 5)		

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Fox Dale						
C/O ITUS CORPORATION	X					
900 WALT WHITMAN ROAD	Λ					
MELVILLE, NY 11747						

### **Signatures**

/s/ Dale Fox	09/02/2014
**Signature of Reporting Person	Date

### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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.