FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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 Type Responses) 1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer					
Baskies Arnold M			Anixa Biosciences Inc [ANIX]					(Check all applicable)X_ Director10% Owner					
(Last) (First) (Middle) 3150 ALMADEN EXPRESSWAY, SUITE 250			3. Date of Earliest Transaction (Month/Day/Year) 04/26/2019					Office	er (give title belo	ow)	Other (specify b	elow)	
(Street)			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					
SAN JOS (City	SE, CA 95	(State)	(Zip)	т	ahla I. Na	m Dominust	iva Caannidiaa	A	und Dian	and of out	Damafiai aller	Deve and	
								uired, Disposed of, or Beneficially Owned 5. Amount of Securities 6. 7. Nature					
1.Title of Security (Instr. 3)		1	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, it	Code (Instr. 8)	(A)	4. Securities Acquir (A) or Disposed of ((Instr. 3, 4 and 5)		Beneficia Reported	ally Owned Following d Transaction(s)		Ownership Form: Direct (D)	
				(Month/Day/Year	Code	V Amount (D) I		Price	(Instr. 3 and 4)				
Common	Stock	(04/26/2019		P		000 4	\$ 4.28	11,000			D	
Reminder:	Report on a s	separate line for	each class of secur	ities beneficially o	wned direc	Persons	who respor						1474 (9-02)
Reminder:	Report on a s	separate line for	Table II - I	Derivative Securit	ies Acquir	Persons containe the form	s who respored in this for a displays a consecution of, or Benderland	m are currer	not requesting noting valid	uired to res OMB cont	spond unle	ss	1474 (9-02)
1. Title of Derivative Security		3. Transaction	Table II - I (3A. Deemed Execution Date any	Derivative Securites, puts, calls, was ten if Transaction Code (Instr. 8)	ies Acquir arrants, oj	Persons contained the form red, Disposotions, con 6. Date E and Expi (Month/I	s who respored in this for a displays a consecution of, or Benderland	eficialirities) 7. Ti Amo Unde	not requesting noting valid	OMB conf	spond unle	of 10. Ownersh Form of Derivatir Security Direct (I or Indire	11. Nature of Indire Benefic: (Instr. 4

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Baskies Arnold M 3150 ALMADEN EXPRESSWAY SUITE 250 SAN JOSE, CA 95118	X					

Signatures

/s/ Arnold Baskies	04/26/2019
**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.