## 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 Response	s)														
Name and Address of Reporting Person * Catelani Michael				2. Issuer Name and Ticker or Trading Symbol Anixa Biosciences Inc [ANIX]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner					
(Last) (First) (Middle) C/O ANIXA BIOSCIENCES, INC., 3150 ALMADEN EXPRESSWAY, SUITE 250				3. Date of Earliest Transaction (Month/Day/Year) 04/30/2020						X Officer (give title below) Other (specify below)  COO & CFO						
(Street) SAN JOSE, CA 95118				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City	·)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	Execution any	,	(Instr. 8)		tion	4. Securities Acquir (A) or Disposed of ( (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	Transaction	Owned Following ansaction(s)		7. Nature of Indirect Beneficial
				(Month/Day/Year		Coc	de	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock		04/30/2020			J <u>(1</u>	Ŋ		1,867	A	\$ 1.61 (2)	5,829			D	
	T		or each class of secur	Derivativ	e Securit	ies Acq	quire	Personta conta the fo	ons wh ained ir orm dis	o respo this fo plays a f, or Be	rm are curre	not requesting ntly valid		ormation spond unle rol numbe	ss	1474 (9-02)
	Conversion		Year) Execution I	4.	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired		tions, convertible secur  6. Date Exercisable and Expiration Date (Month/Day/Year)			itle and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	of 10.	Beneficia Ownershi (Instr. 4)
Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/	(Month/Day/	Coo	str. 8)	of Deriva Securit Acquir (A) or Dispos of (D) (Instr.	tive ties red sed 3,			n Date	Amo Und Secu	Amount	Derivative Security	Securities Beneficially Owned Following Reported Transaction	Owners Form of Derivat Security Direct ( or Indir	hip of Indirect Beneficial Ownersh (Instr. 4)

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Catelani Michael C/O ANIXA BIOSCIENCES, INC. 3150 ALMADEN EXPRESSWAY, SUITE 250 SAN JOSE, CA 95118			COO & CFO			

## **Signatures**

/s/ Michael J. Catelani	05/04/2020
**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).
- The reporting person purchased the shares of common stock reported hereunder pursuant to the Anixa Biosciences, Inc. Employee Stock Purchase Plan (the Plan) which satisfies the requirements of Section 423 of the Internal Revenue Code. The reporting persons purchase of the shares of common stock is exempt from Section 16(b) under Rule 16b-3(c) and is exempt from the reporting requirements of Section 16 by virtue of Rule 16a-3(f)(1)(i)(B), however the reporting person has elected to voluntarily report the acquisition of the shares.
- (2) In accordance with the Plan, the shares were purchased based on 85% of the closing price of Anixa Biosciences, Inc. common stock on April 30, 2020.

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.