Edgar Filing: Advaxis, Inc. - Form 4

	Advaxis, Inc. Form 4 May 01, 2015 FORM Check this if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	5 J 4 UNITED ST s box s box s for 6. T Filed pursu Section 17(a)	FATES SECUI Wa ENT OF CHAN ant to Section 1 of the Public U 30(h) of the Ir	shington, NGES IN SECUR (6(a) of the tility Hold	D.C. 20 BENEF ITIES e Securit ling Con	549 ICIA ies E npany	L OWN xchange y Act of	NERSHIP OF e Act of 1934, 1935 or Section	OMB Number: Expires: Estimated a burden hou response	•	
	1. Name and Ad PETIT ROB	ddress of Reporting Per ERT	Symbol	2. Issuer Name and Ticker or Trading Symbol Advaxis, Inc. [ADXS]				5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 305 COLLEGE ROAD EAST			(Month/I	3. Date of Earliest Transaction (Month/Day/Year) 04/30/2015				(Check all applicable) <u></u> Director <u></u> 10% Owner <u></u> Officer (give title <u></u> Other (specify below) <u>below</u>) Chief Scientific Officer			
	PRINCETO	(Street) N,, NJ 08540		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 			
	(City)	(State) (Zi	ip) Tab	le I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
	1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, i any (Month/Day/Year)		Execution Date, if	Code (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership 7. Nature o Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)			
	G			Code V	Amount	(D)	Price	(Instr. 3 and 4)			
	Common Stock	04/30/2015		F	2,530 (1)	D	\$ 4.03	138,210	D		
	Common Stock	04/30/2015		А	116 <u>(2)</u>	А	\$ 16.81	138,326	D		
	Common Stock	04/30/2015		F	44 <u>(3)</u>	D	\$ 16.81	138,282	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control

Edgar Filing: Advaxis, Inc. - Form 4

number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. 6. Date Exercisable and orNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		Date	Amou Unde Secur	tle and unt of erlying rities r. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
Repo	rting C)wners	Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
PETIT ROBERT 305 COLLEGE ROAD EAST PRINCETON,, NJ 08540			Chief Scientific Officer					
Signatures								
/s/ Sara Bonstein, as attorney-ir Robert	n-fact for	Petit	05/01/2015					
<u>**</u> Signature of Reporting Po	erson		Date					
Explanation of Re	enon	606'						

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).
- (1) Represents shares forfeited by the reporting person in order to pay witholding taxes associated with the vested portion of a previous stock grant.
- (2) The reporting person voluntarily purchases restricted stock directly from the Company at market price on the last trading day of the month.
- (3) Represents shares forfeited by the reporting person in order to pay withholding taxes associated with the stock issuance.

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.