## Edgar Filing: Mohan-Peterson Sheela - Form 4

Mohan-Peter	rson Sheela									
Form 4										
August 02, 2	2017									
FORM	14								-	PPROVAL
	UNITE	D STATE		ITIES Al hington,			NGE (	COMMISSION	OMB Number:	3235-0287
if no long subject to Section 1	Check this box if no longer subject to Section 16. Form 4 or					Expires:January 31 200Estimated averageburden hours per response0.				
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section	17(a) of the		ility Hold	ing Con	ipany	Act of	e Act of 1934, f 1935 or Sectio 40		
(Print or Type I	Responses)									
1. Name and A Mohan-Pete	address of Reporti erson Sheela	ing Person <u>*</u>	Symbol	Name and EC MED			-	5. Relationship of Issuer	f Reporting Pers	son(s) to
		(A.C. 1.11.)						(Chec	ck all applicable	e)
(Last) 5820 NANC	(First) CY RIDGE DF	(Middle) RIVE	3. Date of (Month/D 07/31/20	-	insaction			Director X Officer (give below) Chief Lega		o Owner er (specify Officer
				nendment, Date Original Ionth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>		
SAN DIEGO, CA 92121								Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ities Acc	uired, Disposed of	f, or Beneficial	lly Owned
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Ye	ear) Executi any	emed on Date, if /Day/Year)	3. Transactic Code (Instr. 8)		ispose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Stock	07/31/2017			P <u>(1)</u>	3,000	A	\$ 0.88	9,520	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 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. Transacti Code (Instr. 8)	5. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1.0.0	Director	10% Owner	Officer	Other			
Mohan-Peterson Sheela 5820 NANCY RIDGE DRIVE SAN DIEGO, CA 92121			Chief Legal&Compliance Officer				
Signatures							
/s/ Sheela Mohan-Peterson	08/02/2017	7					

**Signature of Reporting	Date
Person	

## **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) The shares purchased were pursuant to the OncoSec Medical Incorporated 2015 Employee Stock Purchase Plan

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.