CHAMPIONS ONCOLOGY, INC.

Form 4 March 17, 2015

FORM 4

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

OMB APPROVAL

OMB 3235-0287 Number:

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Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** Form 4 or Form 5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person * **ACKERMAN JOEL**

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

CHAMPIONS ONCOLOGY, INC.

(Check all applicable)

Chief Executive Officer

[CSBR]

03/11/2015

(Last) (First) 3. Date of Earliest Transaction (Month/Day/Year)

_X__ Director X_ Officer (give title below)

10% Owner Other (specify

C/O CHAMPIONS ONCOLOGY. INC., ONE UNIVERSITY PLACE, **SUITE 307**

(Street)

(State)

(Middle)

(Zip)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

Table I. Non-Desiration Constitute Assuring Dispersed of an Desirable Constitution

HACKENSACK, NJ 07601

(City)

(3)	()	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ie 1 - Non-i	Derivative Sec	urities	s Acqui	rea, Disposea oi,	or Beneficiali	y Ownea
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	3. 4. Securities Acquired (A) Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Beneficially Form: Owned Direct (D) Following or Indirect	Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)	
Common Stock	03/11/2015		P	2,710,526	A	\$ 0 (1)	3,572,174	D	
Common Stock	03/11/2015		J <u>(1)</u>	70,826 (1)	A	\$ 0 (1)	3,643,000	D	

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date		7. Title and Amount Underlying Securitic (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou Numb Shares
Warrant to purchase shares of Common	\$ 0.48	03/11/2015		A	1,490,789	03/11/2015	03/11/2020	Common Stock	1,49

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
ACKERMAN JOEL C/O CHAMPIONS ONCOLOGY, INC. ONE UNIVERSITY PLACE, SUITE 307 HACKENSACK, NJ 07601	X		Chief Executive Officer			

Signatures

Stock

/s/ Joel
Ackerman

**Signature of Reporting Person

O3/16/2015

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).
- As a result of the transaction represented in the line above, the 70,826 shares of Common Stock were issued for no consideration pursuant (1) to contractual anti-dilution undertakings of the Issuer in a Securities Purchase Agreement dated March 24, 2011 between the Issuer, the reporting person and certain other investors.
- (2) The warrant was acquired in connection with the purchase of shares of Common Stock pursuant to a Securities Purchase Agreement dated March 13, 2015 between the Issuer, the reporting person and certain other investors for no additional consideration.

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.

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