## 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*  DelAversano Robert J			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer						
				ONCOSEC MEDICAL Inc [ONCS]						(Check all applicable) Director 10% Owner				
(Last) (First) (Middle) 24 NORTH MAIN STREET				3. Date of Earliest Transaction (Month/Day/Year) 05/01/2021						X Officer (give title below) Other (specify below)  VP, Finance				
(Street)		4. If Amen	4. If Amendment, Date Original Filed(Month/Day/Year)  Table I - Non-Derivative Securities Acqu					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
PENNINGTON, NJ 08534-2218 (City) (State) (Zip)														
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year	Execution 1	2A. Deemed Execution Date, if		3. Transaction		T		ed 5. Amount of Securitie D) Beneficially Owned For Reported Transaction(s		es 6 ollowing C	5. Ownership	7. Nature of Indirect Beneficial
			(Month/Day/Year)		Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	(nstr. 3 and 4)			Ownership (Instr. 4)
Common Stock		05/03/2021			S		453 (1)	D	\$ 4.86 (1)	24,980			D	
Reminder: Report on a	separate line fo	or each class of secu	rities benefic	cially ov	wned direc	tly or	indirectly							
Reminder: Report on a	separate line fo		Derivative S	Securit	ies Acqui	Pers cont the t	sons who tained in form dis	o respo this fo plays a f, or Be	orm are curre	not requesting ntly valid	OMB con	formation spond unle trol numbe	ss	1474 (9-02)
Reminder: Report on a  1. Title of Derivative Security (Instr. 3)  Price of Derivative Security	3. Transaction Date (Month/Day/	Table II -  n 3A. Deemed Execution D  Year) any	Derivative S	Securit alls, was saction	ies Acqui	Personne the final control of the final control of	sons who tained in form dis	o responding this for Bending security is able in Date	orm are a curre eneficial urities) 7. T Ame Und Seco	not requesting ntly valid	OMB con 8. Price of	spond unle	of 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Natu of Indire Benefici Ownersh (Instr. 4)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
DelAversano Robert J 24 NORTH MAIN STREET PENNINGTON, NJ 08534-2218			VP, Finance			

## **Signatures**

/s/ Robert J. DelAversano	05/04/2021	
**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).
- In connection with the vesting of 1,094 RSUs on May 1, 2021, a total of 453 shares were sold in order to satisfy the reporting person's tax withholding obligations. This sale (1) occurred automatically, and the amount sold corresponded to the tax withholding amount. The reporting person had no control with respect to such sale, which was conducted in accordance with the Issuer's corporate policies.

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.