

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

OMB APPROVAL					
OMB Number:	3235-0104				
Estimated averag	e burden				
nours per respons	se 0.5				

#### INITIAL STATEMENT OF 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 Respons	ses)											
White Billy Joe		Statemen	2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol Akers Biosciences, Inc. [AKER]							
191 OTTO ST.	(First)	(Middle)	— 08/07/2017 —				Issuer	f Reporting Person	· /	5. If Amendment, Date Original Filed(Month/Day/Year)		
DODE TOWN GEN	(Street)						(Check all applicable)  X_Director Officer (give title below)  COMPACT Of ther (specify below)			6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person		
PORT TOWNSEND, WA 98368							below)	Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned							wned		
1. Title of Security (Instr. 4)			В	2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)					
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  SEC 1473 (7-02)  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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								6. Nature of Indirect Beneficial				
1. Title of Derivative 9 (Instr. 4)	security	ane	Date Exercisable d Expiration Date onth/Day/Year)		3. Title and Amount of Securities Underlying Der Security (Instr. 4)			Price of Derivative	Form of Derivati Security	5. Ownership Form of Derivative Security: Direct	Ownership (Instr. 5)	
		Da Ex	te ercisable	Expiration Date	Title	Amour Shares	nt or Number of	Security	(D) or I (I) (Instr. 5			

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
White Billy Joe 191 OTTO ST.	X					
PORT TOWNSEND, WA 98368						

### **Signatures**

/s/ Billy J. White	04/10/2018
**Signature of Reporting Person	Date

## **Explanation of Responses:**

#### No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

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.