# FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

OMB APPROVAL
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#### 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	e Responses)														
1. Name and Address of Reporting Person *- White Billy Joe				2. Issuer Name and Ticker or Trading Symbol Akers Biosciences, Inc. [AKER]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X Director10% Owner				
(Last) (First) (Middle) 535 BROADHOLLOW RD, SUITE B51				3. Date of Earliest Transaction (Month/Day/Year) 09/11/2020							Officer (give	e title below)	Othe	(specify below)	
(Street) MELVILLE, NY 11747				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) (Zip)			(Zip)	Table I - Non-Derivative Securities Acqu					ties Acqui	ired, Disposed of, or Beneficially Owned					
1.Title of Sec (Instr. 3)	curity		2. Transaction Date (Month/Day/Year)	2A. Deer Execution any (Month/I	n Date,	Code (Inst	ransact le tr. 8)	(A) (Ins	or Disposed tr. 3, 4 and (A) count	1 of (D) (5)	5. Amount of S Owned Follow Transaction(s) (Instr. 3 and 4)		I C	Ownership of B	eneficial wnership
							i cquire	in this fo a current d, Dispos	rm are not ly valid Of ed of, or Be	required  MB contro	e collection of to respond ol number. Owned				74 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	on Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. 5. Nu Transaction Deriv Code Secur (Instr. 8) Acqu or Di (D)		Number of 6. rivative an (Murities quired (A) Disposed of str. 3, 4,		and Expiration Date (Month/Day/Year) of U			es	(Instr. 5) E	Derivative Securities Beneficially Owned Following Reported	Form of Derivative Security: Direct (D) or Indirect	(Instr. 4)
				Code	v	(A)		Date Exercisabl	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
				Couc											

#### **Reporting Owners**

D 4 0 N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
White Billy Joe 535 BROADHOLLOW RD SUITE B51 MELVILLE, NY 11747	X					

### **Signatures**

/s/ Billy Joe White	09/11/2020			
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).
- (1) Each restricted stock unit ("RSU") represents a contingent right to receive one share of common stock of Akers Biosciences, Inc. (the "Company"). The Company may also elect to settle the vested RSUs for cash at its discretion.

Reporting Person was granted 219,000 RSUs under the Company's 2018 Equity Incentive Plan, as amended (the "Plan"), with fifty percent (50%) of the RSUs to vest on the first anniversary of the date of grant, and the remaining fifty percent (50%) to vest on the second anniversary of the date of grant; provided that the RSUs shall vest immediately upon the

(2) occurrence of (i) a change in control, provided that the Reporting Person is employed by or providing services to the Company and its affiliates on the closing date of such change in control, (ii) the Reporting Person's termination of employment or service from the Company and its affiliates by reason of the Reporting Person's death or disability, or (iii) the Reporting Person's termination of employment or service by the Company without cause.

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.