FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB Number:	3235-0287
Estimated average burde	n
hours per response:	0.5

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

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* FRAKES JAMES B			2. Issuer Name and Ticker or Trading Symbol AETHLON MEDICAL INC [ AEMD ]		ionship of Reporting Person all applicable) Director	s) to Issuer 10% Owner	
(Last) 9635 GRANITE I	(First) RIDGE DRIVE, SU	(Middle) ITE 100	3. Date of Earliest Transaction (Month/Day/Year) 08/09/2016	X	Officer (give title below) Chief Financial	Other (specify below) Officer	
(Street) SAN DIEGO	,		4. If Amendment, Date of Original Filed (Month/Day/Year) 08/11/2016	6. Individ	dual or Joint/Group Filing (C Form filed by One Report Form filed by More than C	ing Person	
(City)	(State)	(Zip)					

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (Ir 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	Form: Direct (D)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	08/09/2016		A		52,000	<b>A</b> <sup>(1)</sup>	\$0.00	52,200	D	

# 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	 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)	e (Instr. Securi Acquir		ive ies ed (A) osed of	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	Transaction(s) (Instr. 4)					

### Explanation of Responses:

 $1. \ RSU \ was \ originally \ reported \ in \ Table \ II \ of \ the \ Reporting \ Person's \ Form \ 4 \ filed \ 08/11/2016.$ 

#### Remarks:

/s/ James B. Frakes

05/13/2019

\*\* Signature of Reporting Person

Date

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).