Silverman Joshua Form 3 September 20, 2018

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

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

SECURITIES

response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person *

A Silverman Joshua

(Last)

(First)

(Middle)

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Statement

(Month/Day/Year)

Akers Biosciences, Inc. [AKER]

09/06/2018

4. Relationship of Reporting Person(s) to Issuer

X Director

5. If Amendment, Date Original

Filed(Month/Day/Year)

3 PINECREST ROAD

(Street)

(Check all applicable)

6. Individual or Joint/Group

Filing(Check Applicable Line) _X_ Form filed by One Reporting

Person

SCARSDALE, ÂNYÂ 10583

(City) (State) (Zip)

Officer (give title below) (specify below)

Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)

2. Amount of Securities Beneficially Owned

(Instr. 4)

Ownership Form:

4. Nature of Indirect Beneficial Ownership (Instr. 5)

10% Owner

_Other

Direct (D) or Indirect (I) (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)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security**

4. Conversion or Exercise Price of Derivative

Security

5. Ownership Form of Derivative Security:

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Expiration Date Exercisable Date

Title

(Instr. 4)

Amount or Number of Shares

or Indirect (I) (Instr. 5)

Direct (D)

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Silverman Joshua

3 PINECREST ROAD $\hat{A} \times \hat{A} + \hat{A} \times \hat{A} = \hat{A} + \hat{A} \times \hat{A} + \hat{A} \times \hat{A} = \hat{A} \times \hat{A} + \hat{A} \times \hat{A} = \hat{A} \times \hat{A} \times \hat{A} \times \hat{A} = \hat{A} \times \hat{A} \times \hat{A} \times \hat{A} \times \hat{A} = \hat{A} \times \hat{A}$

SCARSDALE, NYÂ 10583

Signatures

/s/ Joshua 09/13/2018 Silverman

**Signature of Date
Reporting Person

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.

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