# FORM 4

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

OMB APPF	ROVAL
OMB Number:	3235-0287
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hours per response	e 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

	pe Response														
1. Name and Address of Reporting Person* RYAN UNA S		2. Issuer Name and Ticker or Trading Symbol RenovoRx, Inc. [RNXT]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_Director 10% Owner							
(Last) (First) (Middle) C/O RENOVORX, INC., 4546 EL CAMINO REAL, SUITE B1			3. Date of Earliest Transaction (Month/Day/Year) 03/10/2022						Officer (g	ive title below)	Oth	er (specify below)			
(Street)			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					
LOS ALTOS, CA 94022 (City) (State) (Zip)			Table I. Non-Derivative Securities Acqu						ties Acqui	nired, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	Title of Security 2. Transaction Date					3. Tra Code (Instr.		nsaction 4	. Securities Acquired A) or Disposed of (D) Instr. 3, 4 and 5)		5. Amount of Securities Be Owned Following Reported Transaction(s)		eneficially d	5. 7. Ownership of Form: Be	Nature Indirect eneficial
				(Month/	'Day/Υε		Code	e V A	amount (A)	or	(Instr. 3 and 4) Direct (D) or Indirect (I)		or Indirect (Ir	wnership nstr. 4)	
Reminder:	Report on a	separate line for each	1 class of securities	belleficia	ily own	za ane		Person contair	s who resp ned in this f splays a cu	orm are n	ot required	to respon	d unless the		74 (9-02)
Reminder:	Report on a s	separate line for each	n class of securities	belleficia	ily own	za arre		Person contair	ned in this f	orm are n	ot required	to respon	d unless the		74 (9-02)
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#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
RYAN UNA S C/O RENOVORX, INC. 4546 EL CAMINO REAL, SUITE B1 LOS ALTOS, CA 94022	X					

### **Signatures**

/s/ Una S. Ryan	03/11/2022
**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)
- $\textbf{(1)} \ \ \text{The shares subject to the option vest in twelve equal monthly installments beginning on November 1, 2021.}$

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.