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

ngton, D.C. 20549	OMB APPROVAL

STATEMENT	OF CH	IANGES	IN BENEF	FICIAL	OWNER	SHIP

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

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*  OAKES FRANK R.					2. Issuer Name and Ticker or Trading Symbol Stellar Biotechnologies, Inc. [ SBOT ]								_	ıble)	g Perso	10% Ow	wner	
	`	TECHNOLOGI	(Middle) ES, INC.		3. Date of Earliest Transaction (Month/Day/Year) 11/24/2015								Officer (give title below)  President, CEO 8			Other (specify below) & Director		
(Street) PORT HUENEM			93041 (Zip)	4	. If Ame	endme	ent, Date o	of Origi	nal File	d (Month/D	ay/Year)		6. Inc Line)	Form file	ed by One	Repor	Check Appl ting Person One Report	
(City)	(3)			-Derivati	Se	CUri	ities Ac	auira	d Di	enosed	of or	Ron	eficially	Owned				
1. Title of Security (Instr. 3) 2. Tra		2. Transacti	Transaction te		2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction Dispose Code (Instr.		rrities Acquired (A) ed Of (D) (Instr. 3, 4		l (A) or	5. Amount Securities Beneficial Owned Fo	ly	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
						Co	de V	Amount	(	A) or D)	Price	Reported Transaction (Instr. 3 ar				Instr. 4)		
Common Shares, without par value 11/2			11/24/20	1/2015		2	ζ	150,0	150,000 I		\$2.5	193,965			D			
			Table II - [	Derivativ e.g., put:										Owned				
Derivative Conversion		rcise (Month/Day/Year) if any of tive (Month/Day/		ate, Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
				Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title		Amount or Number of Shares		(Instr. 4)			
Call Option (Obligation to Sell)	\$2.5	11/24/2015		х			150,000	11/26	/2012	11/25/2015	Comn		150,000	\$0	0		D	

**Explanation of Responses:** 

/s/ Kathi Niffenegger, Attorney-11/25/2015

in-Fact

\*\* 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> 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).