The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

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

Washington, D.C. 20549 **FORM D** 

## **Notice of Exempt Offering of Securities**

OMB APPROVAL

OMB Number: 3235-0076 Estimated average burden

hours per response:

4.00

,				
1. Issuer's Identity				
CIK (Filer ID Number)	Previous	None	Entity Type	
0001100397	Names Advaxis, Inc		X Corporation	
Name of Issuer				
Ayala Pharmaceuticals, Inc.	GREAT EA	PECTATIONS & ASSOCIA		
Jurisdiction of Incorporation/	Organization		Limited Liability Company	
DELAWARE	organization		General Partnership	
Year of Incorporation/Organiz	zation		Business Trust	
X Over Five Years Ago	Lation		Other (Specify)	
Within Last Five Years (S	Pagifu Voor			
<b>=</b>	specify fear)			
Yet to Be Formed				
2. Principal Place of Busine	ess and Contact Information			
Name of Issuer				
Ayala Pharmaceuticals, Inc.				
Street Address 1		Street Address 2		
9 DEER PARK DRIVE		SUITE K-1		
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer	
MONMOUTH JUNCTION	NEW JERSEY	08852	732 545 1590	
3. Related Persons				
Last Name	First Name		Middle Name	
Berlin	Ken		A.	
Street Address 1	Street Address 2			
9 Deer Park Drive, Suite K-1				
City	State/Province/C	Country	ZIP/PostalCode	
Monmouth Junction	NEW JERSEY		08852	
Relationship: $X$ Executive $C$	Officer X Director Promoter			
Clarification of Response (if N	lecessary):			
President, Chief Executive Offic	er and Director			
Last Name	First Name		Middle Name	
Golan	Roy			
Street Address 1	Street Address 2			
9 DEER PARK DRIVE	SUITE K-1			
City	State/Province/C	ountry	ZIP/PostalCode	
MONMOUTH JUNCTION	NEW JERSEY		08852	
Relationship: $\overline{\mathbf{X}}$ Executive (	Officer Director Promoter			
Clarification of Response (if N	lecessary):			
Chief Financial Officer				
Last Name	First Name		Middle Name	
Gitelman	Igor			
Street Address 1	Street Address 2			
9 DEER PARK DRIVE	SUITE K-1			
City	State/Province/C	Country	ZIP/PostalCode	

08852

MONMOUTH JUNCTION

**NEW JERSEY** 

Relationship: X Executive Office	er Director Promoter		
Clarification of Response (if Neces	ssary):		
SVP Finance and former Interim CFC			
Last Name	First Name	Middle Name	
Gutierrez	Andres		
Street Address 1	Street Address 2		
9 DEER PARK DRIVE	SUITE K-1		
City	State/Province/Country	ZIP/PostalCode	
MONMOUTH JUNCTION	NEW JERSEY	08852	
Relationship: $\boxed{\mathbf{X}}$ Executive Office	er Director Promoter		
Clarification of Response (if Neces	ssary):		
EVP and Chief Medical Officer			
Last Name	First Name	Middle Name	
Sidransky	David		
Street Address 1	Street Address 2		
9 DEER PARK DRIVE	SUITE K-1		
City	State/Province/Country	ZIP/PostalCode	
MONMOUTH JUNCTION	NEW JERSEY	08852	
Relationship: Executive Office	r X Director Promoter		
Clarification of Response (if Neces	ssary):		
Chair of Board			
Last Name	First Name	Middle Name	
Appel	Roni	A.	
Street Address 1	Street Address 2		
9 DEER PARK DRIVE	SUITE K-1		
City	State/Province/Country	ZIP/PostalCode	
MONMOUTH JUNCTION	NEW JERSEY	08852	
Relationship: Executive Office	<u> </u>		
Clarification of Response (if Neces			
·	•		
Last Name	First Name	Middle Name	
Bisker-Leib	Vered		
Street Address 1	Street Address 2		
9 DEER PARK DRIVE	SUITE K-1		
City	State/Province/Country	ZIP/PostalCode	
MONMOUTH JUNCTION	NEW JERSEY	08852	
Relationship: Executive Office	r X Director Promoter		
Clarification of Response (if Neces	ssary):		
Last Name	First Name	Middle Name	
Cabilly	Yuval		
Street Address 1	Street Address 2		
9 DEER PARK DRIVE	SUITE K-1		
City	State/Province/Country	ZIP/PostalCode	
MONMOUTH JUNCTION	NEW JERSEY	08852	
Relationship: Executive Office			
Clarification of Response (if Neces	ssary):		
Last Name	First Name	Middle Name	
Goldberg	Murray	A.	
Street Address 1	Street Address 2	<del></del>	
9 DEER PARK DRIVE	SUITE K-1		
City	State/Province/Country	ZIP/PostalCode	
~···,	State, 1 To villoci Southly	211 /1 Johan John	

MONMOUTH JUNCTION	NEW JERSEY	08852
Relationship: Executive Officer X Dire	ctor Promoter	
Clarification of Response (if Necessary):	_	
Last Name	First Name	Middle Name
Martell	Bridget	
Street Address 1	Street Address 2	
9 DEER PARK DRIVE	SUITE K-1	
City	State/Province/Country	ZIP/PostalCode
MONMOUTH JUNCTION	NEW JERSEY	08852
		00032
Relationship: Executive Officer X Dire	ctor Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Orbach	Pini	
Street Address 1	Street Address 2	
9 DEER PARK DRIVE	SUITE K-1	
City	State/Province/Country	ZIP/PostalCode
MONMOUTH JUNCTION	NEW JERSEY	08852
Relationship: Executive Officer X Dire		
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Spiegel	Robert	
Street Address 1	Street Address 2	
9 DEER PARK DRIVE	SUITE K-1	
City	State/Province/Country	ZIP/PostalCode
MONMOUTH JUNCTION	NEW JERSEY	08852
Relationship: Executive Officer X Dire	ctor Promoter	
Clarification of Response (if Necessary):		
4. Industry Group		
Agriculture	Health Care	Detailing
Banking & Financial Services	X Biotechnology	Retailing
	Biotechnology	Restaurants
Commercial Banking	Health Insurance	Technology
Insurance	Hospitals & Physicians	Computers
Investing		Computers
Investment Banking	Pharmaceuticals	Telecommunications
Pooled Investment Fund	Other Health Care	Other Technology
Is the issuer registered as	Manufacturing	Travel
an investment company under		
the Investment Company	Real Estate	Airlines & Airports
Act of 1940?	Commercial	Lodging & Conventions
Yes No	Construction	
Other Banking & Financial Services	REITS & Finance	Tourism & Travel Services
Business Services		Other Travel
	Residential	Other
Energy	Other Real Estate	
Coal Mining		
Electric Utilities		
Energy Conservation		
Environmental Services		
Oil & Gas		
Other Energy		

5. Issuer Size				
Revenue Range OR    No Revenues   \$1 - \$1,000,000   \$1,000,001 - \$5,000,000   \$5,000,001 - \$25,000,000   \$25,000,000   Over \$100,000,000   Over \$100,000,000   X Decline to Disclose   Not Applicable   Not Applicable   6. Federal Exemption(s) and Exclusion(s) Claime	Aggregate Net Asset Value  No Aggregate Net Asset Value  \$1 - \$5,000,000  \$5,000,001 - \$25,000,000  \$25,000,001 - \$50,000,000  \$50,000,001 - \$100,000,000  Over \$100,000,000  Decline to Disclose  Not Applicable			
or reading Exemption(e) and Exemption(e) claims	a (Solot all that apply)			
Rule 504(b)(1) (not (i), (ii) or (iii)) Rule 504 (b)(1)(i) Rule 504 (b)(1)(ii) Rule 504 (b)(1)(iii) X Rule 506(b) Rule 506(c) Securities Act Section 4(a)(5)	□ Investment Company Act Section 3(c)         □ Section 3(c)(1)       □ Section 3(c)(9)         □ Section 3(c)(2)       □ Section 3(c)(10)         □ Section 3(c)(3)       □ Section 3(c)(11)         □ Section 3(c)(4)       □ Section 3(c)(12)         □ Section 3(c)(5)       □ Section 3(c)(13)         □ Section 3(c)(6)       □ Section 3(c)(14)         □ Section 3(c)(7)			
7. Type of Filing				
	First Sale Yet to Occur			
Does the Issuer intend this offering to last more that  9. Type(s) of Securities Offered (select all that approximately select all the select all that approximately select all the select all that approximately select all the select				
X Equity Debt Option, Warrant or Other Right to Acquire Anoth X Security to be Acquired Upon Exercise of Option Right to Acquire Security	Pooled Investment Fund Interests Tenant-in-Common Securities Der Security Mineral Property Securities			
10. Business Combination Transaction				
Is this offering being made in connection with a bus merger, acquisition or exchange offer?	iness combination transaction, such as a X Yes No			
Clarification of Response (if Necessary):				
	nare was exchanged for 1.82285 Issuer common shares. Of shares issued, 466,479 were issued under			
11. Minimum Investment				
Minimum investment accepted from any outside inv	restor \$0 USD			
12. Sales Compensation				
Recipient	Recipient CRD Number X None			
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number X None			
Street Address 1	Street Address 2			
City	State/Province/Country ZIP/Postal Code			
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	States Foreign/non-US			

13. Offering and Sales Amounts
Total Offering Amount \$433,825 USD or Indefinite
Total Amount Sold \$433,825 USD
Total Remaining to be Sold \$0 USD or Indefinite
Clarification of Response (if Necessary):
Amounts above based on \$0.93 per share, the closing price of the common stock on OTCQX on date of merger.
14. Investors
Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering.  Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:
15. Sales Commissions & Finder's Fees Expenses
Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.
Sales Commissions \$0 USD Estimate
Finders' Fees \$0 USD Estimate
Clarification of Response (if Necessary):
16. Use of Proceeds
Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.
\$0 USD Estimate
Clarification of Response (if Necessary):
Signature and Submission
Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below

to file this notice.

## **Terms of Submission**

In submitting this notice, each issuer named above is:

- · Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.\*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disgualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Ayala Pharmaceuticals, Inc.	/s/ Ken A. Berlin	Ken A. Berlin	President and CEO	2023-11-02

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 number.

