FORM 4	4
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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 Washington, D.C. 20549

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

#### 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

1. Name and Address of Reporting Per Butera Salvatore Thomas	2. Issuer Name an VOLITIONRX			0.	ol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) 13215 BEE CAVE PARKWAY GALLERIA OAKS B	(Middle) 7, SUITE 125,	3. Date of Earliest Transaction (Month/Day/Year) 12/01/2020						Officer (give title below)Other (specify below)			
(Street) AUSTIN, TX 78738	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting 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)	Execution Date, if	3. Transac Code (Instr. 8)	tion	· · · · · · · · · · · · · · · · · · ·		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	7. Nature of Indirect Beneficial	
		(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock	12/01/2020		А		15,000 ( <u>1)</u>	А	\$ 0	15,000	D		
Common Stock					5,000	D (2)					

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

Persons who respond to the collection of information

SEC 1474 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	5			6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n N	Jumb	er	and Expiration	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	0	f		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Γ	Deriva	ative			Secur	ities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				S	lecuri	ities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				A	Acqui	red			4)			Following	Direct (D)	
					(4	A) or							Reported	or Indirect	
					Γ	Dispo	sed						Transaction(s)	(I)	
					0	f(D)							(Instr. 4)	(Instr. 4)	
					· ·	Instr.	· · ·								
					4	, and	5)								
											Amount				
								Date	Expiration		or				
								Exercisable	Expiration Date	Title	Number				
								Excicisable	Date		of				
				Code V	/ (	(A)	(D)				Shares				

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Butera Salvatore Thomas 13215 BEE CAVE PARKWAY SUITE 125, GALLERIA OAKS B AUSTIN, TX 78738	Х						

### Signatures

/s/ Salvatore Thomas Butera	12/03/2020
***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).
- (1) Dr. Butera received restricted stock units subject to a 2-year vesting schedule, vesting as to 7,500 units on each of 12/01/21 and 12/01/22, respectively. Upon vesting and settlement, the reporting person will receive a number of shares of common stock equal to the number of restricted stock units that have vested.
- (2) These shares of Common Stock are jointly owned by Dr. Butera and his spouse.

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.