

## INITIAL STATEMENT OF 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

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|--|--|--|
| 1. Name and Address of Reporting Person *<br><b>MOY EDMUND C.</b><br><br>(Last) (First) (Middle) | 2. Date of Event Requiring Statement (MM/DD/YYYY)<br><b>2/9/2018</b>   | 3. Issuer Name and Ticker or Trading Symbol<br><b>ICOX INNOVATIONS INC. [ICOX]</b>   |
| <b>4251 CAMPBELL AVENUE,<br/>SUITE 313</b><br><br>(Street)                                       | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable)<br><br><input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner<br><input type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) |  |
| <b>ARLINGTON, VA 22206</b><br><br>(City) (State) (Zip)   | 5. If Amendment, Date Original Filed (MM/DD/YYYY)  | 6. Individual or Joint/Group Filing (Check Applicable Line)<br><br><input checked="" type="checkbox"/> Form filed by One Reporting Person<br><input type="checkbox"/> 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) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---------------------------------|---|--|---|
|---------------------------------|---|--|---|

### Table II - Derivative Securities Beneficially Owned ( e.g. , puts, calls, warrants, options, convertible securities)

| 1. Title of Derivate Security (Instr. 4) | 2. Date Exercisable and Expiration Date (MM/DD/YYYY) |                 | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) |                            | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--|--|-----------------|---|----------------------------|--|---|---|
|  | Date Exercisable                                     | Expiration Date | Title   | Amount or Number of Shares |  |   |   |
| <b>Stock Option</b>                      | <b>2/9/2018</b><br><a href="#">(1)</a>               | <b>2/9/2028</b> | <b>Common Stock</b>   | <b>100000</b>              | <b>\$0.60</b>  | <b>D</b>  |   |

#### Explanation of Responses:

(1) The options vest as follows: (i) 1/3 on date of grant, (ii) 1/3 on the first anniversary of date of grant and (iii) 1/3 on the second anniversary of date of grant.

#### Reporting Owners

| Reporting Owner Name / Address   | Relationships |           |         |       |
|--|---------------|-----------|---------|-------|
|  | Director      | 10% Owner | Officer | Other |
| <b>MOY EDMUND C.<br/>4251 CAMPBELL AVENUE, SUITE 313<br/>ARLINGTON, VA 22206</b> | <b>X</b>      |           |         |       |

#### Signatures

/s/ **Edmund C. Moy**

**1/24/2019**

\*\* Signature of Reporting Person

Date

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

\* 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.

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