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

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

OMB APPROVAL

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

| | pe Response | | | | | | | | | | | | | |
|---|---|--|---|---|---|--|--|---|---|----------------|---------------------------------|---|--|---|
| 1. Name and Address of Reporting Person * DAVIS RICHARD A | | | | 2. Issuer Name and Ticker or Trading Symbol OXIS INTERNATIONAL INC [OTTCBB] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director 10% Owner | | | | | |
| (Last) (First) (Middle) 11655 IKOA CT NW | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/30/2004 | | | | | Officer (give | e title below) | Othe | r (specify below) |) | |
| (Street) SILVERDALE, WA 98383 | | | 4. If Amendment, Date Original Filed(Month/Day/Year) 06/29/2004 | | | | | _X_ F | 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 Acq | | | | | Acquired, | uired, Disposed of, or Beneficially Owned | | | | | |
| 1.Title of S (Instr. 3) | Security | | 2. Transaction Date (Month/Day/Year) | 2A. Dee Execution any (Month/ | n Date, | if Code (Inst | e (A) (In | Securities Acqu) or Disposed or str. 3, 4 and 5) (A) or nount (D) | f (D) Own Trans | | ecurities Be ing Reported | d (| Ownership Form: B Direct (D) | . Nature f Indirect seneficial ownership (Instr. 4) |
| | | | | | | | | who respond | | | | | ed SEC 12 | 1/4 (9-02) |
| | | | Table II - | | | | displays | orm are not re a currently v | ralid OMB | control r | | ; IOIIII | | |
| 1. Title of Derivative Security (Instr. 3) | Conversion | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4. Transacti | s, calls, 5. N of Der Sec Acc (A) Dis of (| warran Number rivative urities quired or posed D) str. 3, 4, | displays | sed of, or Benefactorial sable and te | ralid OMB | d Amount | 8. Price of | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Ownership Form of Derivative Security: Direct (D) or Indirect | Beneficia Ownersh (Instr. 4) |
| Derivative Security | Conversion or Exercise Price of Derivative | Date | 3A. Deemed Execution Date, if any | (e.g., puts) 4. Transacti Code (Instr. 8) | s, calls, 5. N of Der Sec Acc (A) Dis of ((Ins | Jumber vivative urities quired or posed D) str. 3, 4, 5) | displays equired, Dispos ts, options, con 6. Date Exerci Expiration Da | sed of, or Benefactorial sable and te | ficially Own ties) 7. Title and of Underly Securities | d Amount | 8. Price of Derivative Security | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(| Ownership Form of Derivative Security: Direct (D) or Indirects (I) | of Indire Benefici Ownersh (Instr. 4) |

Reporting Owners

| B (1 0 N (| Relationships | | | | |
|---|---------------|--------------|---------|-------|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | |
| DAVIS RICHARD A 11655 IKOA CT NW SILVERDALE, WA 98383 | X | | | | |

Signatures

| Richard A. Davis | 06/30/2004 |
|---------------------------------|------------|
| **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).

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.