

**FORM 3****UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

**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

## OMB APPROVAL

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|                                                                                                                                                                                                                                                                                                       |                                                                               |                                                                                                                          |                                                                                                                                                                                                               |                                                                                                                                                                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Name and Address of Reporting Person *<br><b>Desikan Anantha</b><br><br>(Last) (First) (Middle)<br><b>C/O ICL GROUP LTD.</b><br><b>MILLENNIUM TOWER, 23 ARENHA ST.</b><br><br>(Street)<br><b>TEL AVIV</b> <b>6120201</b><br><br>(City) (State) (Zip/Postal Code)<br><b>ISRAEL</b><br><br>(Country) | 2. Date of Event Requiring Statement<br>(Month/Day/Year)<br><b>03/18/2026</b> | 3. Issuer Name and Ticker or Trading Symbol<br><b>ICL Group Ltd. [ ICL ]</b><br>3a. Foreign Trading Symbol<br><b>ICL</b> | 4. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)<br>Director 10% Owner<br><b>X</b> Officer Other<br>(give title below) (specify below)<br><b>EVP, Chief Innov. &amp; Tech Ofcr.</b> | 5. If Amendment, Date of Original Filed<br>(Month/Day/Year)<br><br>6. Individual or Joint/Group Filing<br>(Check Applicable Line)<br><b>X</b> Form filed by One Reporting Person<br>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 Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) |                 | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) |                            | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form: 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 |                                                        |                                                          |                                                       |
| Stock Options (Right to Buy)               | (1)                                                      | 02/08/2027      | Ordinary Shares                                                             | 545,365                    | \$9.93 <sup>(3)</sup>                                  | D <sup>(4)</sup>                                         |                                                       |

|                              |     |            |                 |         |                       |                  |  |
|------------------------------|-----|------------|-----------------|---------|-----------------------|------------------|--|
| Stock Options (Right to Buy) | (2) | 04/04/2029 | Ordinary Shares | 940,285 | \$6.03 <sup>(5)</sup> | D <sup>(4)</sup> |  |
|------------------------------|-----|------------|-----------------|---------|-----------------------|------------------|--|

**Explanation of Responses:**

1. The stock options are fully vested and exercisable.
2. The stock options vest in three equal annual installments from the April 4, 2024 grant date.
3. Represents an exercise price of NIS 31.27, converted to U.S. dollars using the Bank of Israel representative exchange rate of \$1.00 to NIS 3.149 as of March 27, 2026.
4. The options are held by a Trustee in the name of the Reporting Person.
5. Represents an exercise price of NIS 18.99, converted to U.S. dollars using the Bank of Israel representative exchange rate of \$1.00 to NIS 3.149 as of March 27, 2026.

/s/ Desikan Anantha

\*\* Signature of Reporting Person

03/30/2026

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 Number.**