FORM 4

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

Washington, D.C. 20549

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Person*  Hexter Joshua  (Last) (First) (Middle)  9 ALFASI ST.  (Street)						Issuer Name and Ticker or Trading Symbol     ORAMED PHARMACEUTICALS INC. [     ORMP ]      In the second of Earliest Transaction (Month/Day/Year)     O5/03/2018      If Amendment, Date of Original Filed (Month/Day/Year)									c all appl Director Office below C	icable) or r (give title ) hief Opera	ating	ng (Check A	wner specify pplicable	
JERUSA (City)			2302 Zip)			X										X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)					ction	ion 2A. Deemed Execution Date,				4. Secui		rities Acquired (sed Of (D) (Instr. 3		A) or Securit Benefic Owned Follow Report Transa		ount of 6. ties Fo (D Inc. ving (Inc. ving (		m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transact Code (In 8)		on of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivativ Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership Form: Direct (D) or Indirect (I) (Instr.	Beneficial Ownership	
					Code	v	(A)		Date Exercisable	Exp	oiration te	Title	Amour or Number of Shares	r						
Stock option (right to buy)	\$6.7	05/03/2018			A		30,000		(1)	05/0	03/2028	Common Stock	30,00	0	\$0	30,000		D		

## Explanation of Responses:

 $1.\ The\ Stock\ Option\ will\ vest\ in\ 16\ equal\ installments\ of\ 1,875\ on\ the\ last\ day\ of\ each\ quarter\ commencing\ June\ 30,\ 2018.$ 

<u>/s/ Joshua Hexter</u> <u>05/07/2018</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.

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.