FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

vvasi	migton,	D.C.	20343	

	OMB APPRO	OVAL
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287
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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Se	ection	su(n) o	it the II	ivestme	nt Cor	npany Act o	1940							
1. Name and Address of Reporting Person* Rabinowitz Michael			2. Issuer Name and Ticker or Trading Symbol ORAMED PHARMACEUTICALS INC. [ORMP]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last)	(Last) (First) (Middle)					Order 1] :	X Office below	er (give title v)		Other (s below)	specify
1185 AVENUE OF THE AMERICAS, THIRD FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 12/28/2021										Chief Commercial Officer					
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
NEW YO	ORK, N	Y 1	0036											:	_	,		oorting Perso an One Repo	- 1
(City)	(Si	rate) (2	Zip)												Perso		ie uie	in One Repo	Tung
	`			n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	 ficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Execution Date,		3. 4. Securities Acquired Disposed Of (D) (Instr. Code (Instr. 5)			iired (a	, 4 and Secur Benef Owne		ities Folicially (Display (Dis		n: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) (D)	or F	rice		ed ction(s) 3 and 4)			(Instr. 4)
Common	Stock			12/28/2	2021		F ⁽¹⁾		9,532	Г	, (12.9	90,468			D			
	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 Security 3. Transaction Date Execution Date, if any (Month/Day/Year)		4. Transa Code (8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

1. Payment of tax liability by withholding securities incident to the vesting of the issued security.

/s/ Michael Rabinowitz

12/30/2021

** 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 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.