SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response: 0.5

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 A | Address of Repo n David | 2. Date of E Requiring S (Month/Day 07/05/202 | Statement //Year) | 3. Issuer Name and Ticker or Trading Symbol ORAMED PHARMACEUTICALS INC. [ORMP] | | | | | | | |
|--|--|--|----------------------|--|--|--|--|------------|---|--|--|
| (Last) 20 MAMIL (Street) JERUSALI | (First) LA AVENUI EM L3 (State) | (Middle) E 9414904 (Zip) | | | 4. Relationship of Reporting Issuer (Check all applicable) Director X Officer (give title below) Chief Financial | | 10% Owner Other (specify below) | | 5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | | i | 2. Amount of Securities Beneficially Owned (Instr. 4) (D) or In (I) (Instr | | Direct Ownership (Instr. 5) ndirect | | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | |
| | | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Se Underlying Derivative Se (Instr. 4) | | | 4. Conversi or Exerci | ion ise | 5. Ownership Form: | 6. Nature of Indirect Beneficial Ownership (Instr. | |
| | | Date Exercisable | Expiration Date | Title | | Amount or Number of Shares | Price of Derivativ Security | ive or | Direct (D) or Indirect (I) (Instr. 5) | 5) | |

Explanation of Responses:

No securities are beneficially owned.

/s/ David Silberman

Date

07/08/2021

** Signature of Reporting Person

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.