UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM 8-K

CURRENT REPORT
Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of report (Date of earliest event reported): January 14, 2016

ORAMED PHARMACEUTICALS INC.
(Exact name of registrant as specified in its charter)

DELAWARE	**001-35813**	**98-0376008**
(State or Other Jurisdiction of Incorporation)	(Commission File Number)	(IRS Employer Identification No.)

Hi-Tech Park 2/4 Givat Ram, PO Box 39098, Jerusalem, Israel	**91390**
(Address of Principal Executive Offices)	(Zip Code)

+972-2-566-0001
(Registrant's telephone number, including area code)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

☐ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

☐ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

☐ Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

☐ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

ITEM 7.01. REGULATION FD DISCLOSURE.

Oramed Pharmaceuticals Inc. has posted an updated corporate presentation to its website. A copy of the presentation is furnished with this Current Report on Form 8-K as Exhibit 99.1 and is incorporated herein by reference.

ITEM 9.01. FINANCIAL STATEMENTS AND EXHIBITS.

(d) Exhibits.

99.1	Corporate Presentation

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

ORAMED PHARMACEUTICALS INC.

By: /s/ Nadav Kidron
Name: Nadav Kidron
Title: President and CEO

January 14, 2016

oramed Pharmaceuticals Inc

Addressing the Multibillion-Dollar Injectable Drug Markets with Oral Formulations

January 2016

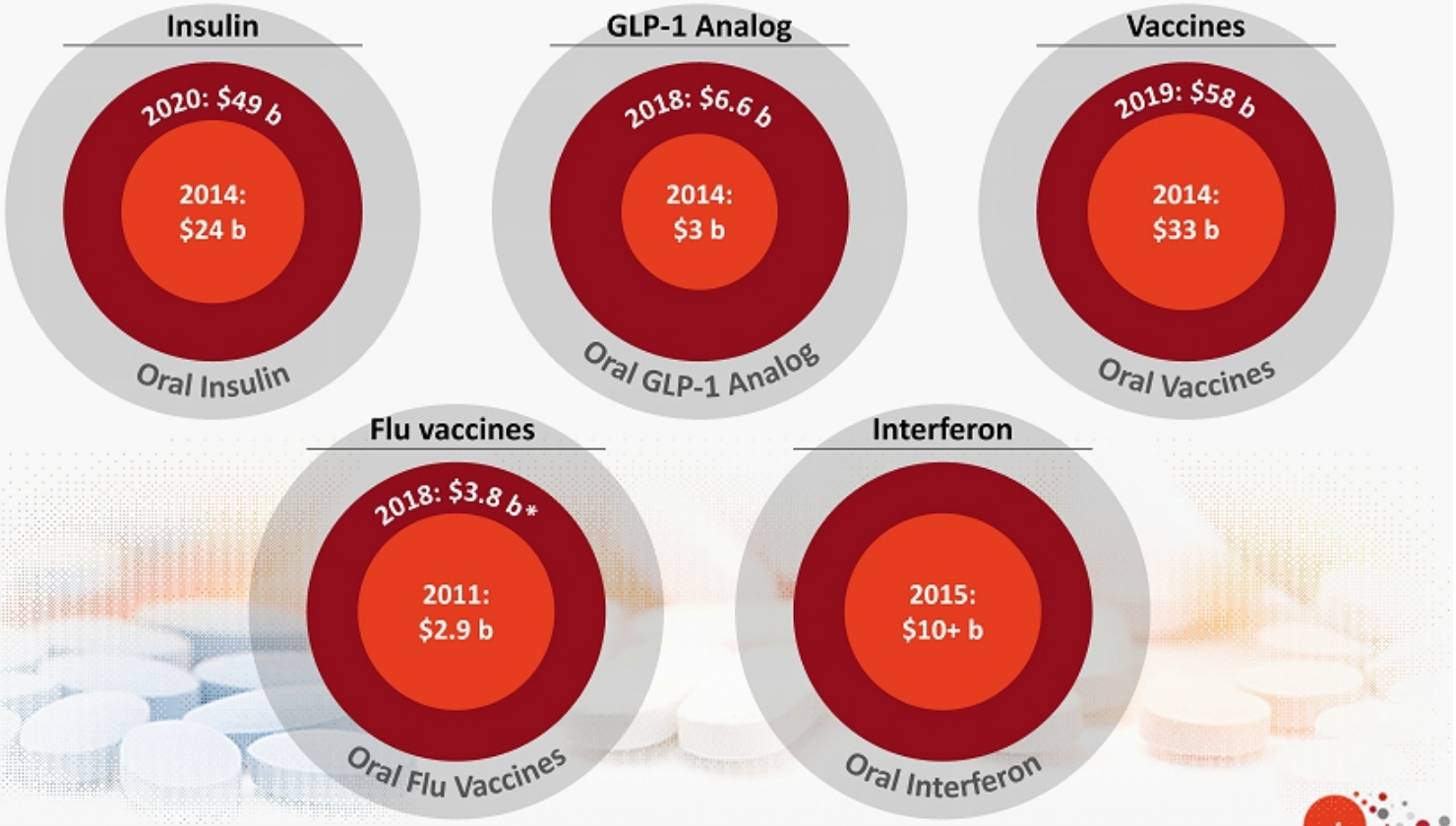
Safe Harbor

Certain statements contained in this material are forward-looking statements. These forward-looking statements are based on the current expectations of the management of Oramed only, and are subject to a number of factors and uncertainties that could cause actual results to differ materially from those described in the forward-looking statements, including the risks and uncertainties related to the progress, timing, cost, and results of clinical trials and product development programs; difficulties or delays in obtaining regulatory approval or patent protection for our product candidates; competition from other pharmaceutical or biotechnology companies; and our ability to obtain additional funding required to conduct our research, development and commercialization activities, and others, all of which could cause the actual results or performance of Oramed to differ materially from those contemplated in such forward-looking statements. Except as otherwise required by law, Oramed undertakes no obligation to publicly release any revisions to these forward-looking statements to reflect events or circumstances after the date hereof or to reflect the occurrence of unanticipated events. For a more detailed description of the risks and uncertainties affecting Oramed, reference is made to Oramed's reports filed from time to time with the Securities and Exchange Commission. which involve known and unknown risks, uncertainties and other factors which may cause the actual results, performance or achievements of the company, or industry results, to be materially different from any future results, performance or achievements expressed or implied by such forward-looking statements. Please refer to the company's filings with the Securities and Exchange Commission for a comprehensive list of risk factors that could cause actual results, performance or achievements of the company to differ materially from those expressed or implied in such forward-looking statements. Oramed undertakes no obligation to update or revise any forward-looking statements.

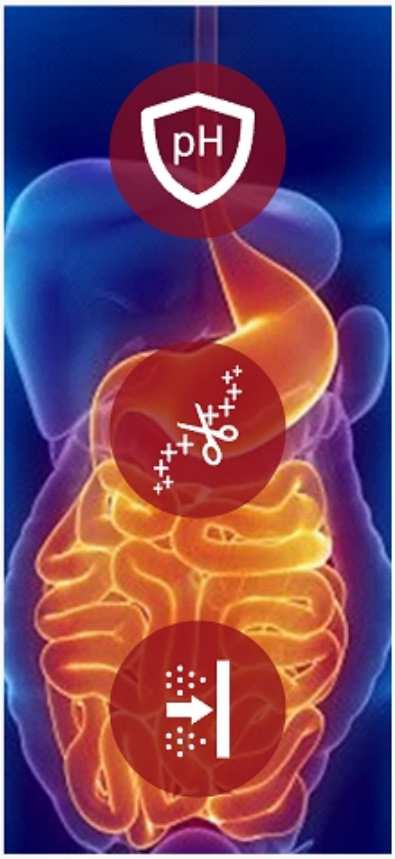
Oramed Snapshot

- **Proprietary oral protein delivery platform**
- **Insulin first** - initially targeting the lucrative insulin market. Additional huge markets in the pipeline
- **Strong financial position** $39M in cash and investments, no debt
- **Strong management** team backed by world-class scientific experts
- **Multiple value-creation events** for this year including completion of FDA Phase IIb study for oral insulin
- **NASDAQ:** ORMP

Funneling Huge Injectable Drug Markets to Novel Oral Formulations



An Unsolved Challenge: Proteins and Peptides do Not Survive the Digestive System

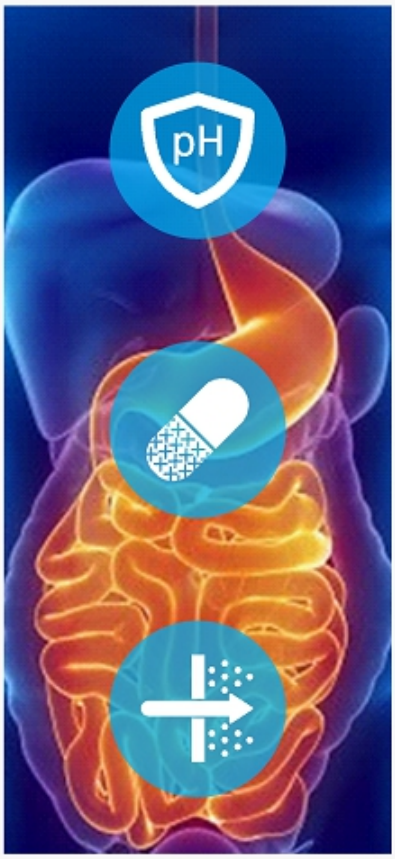


Harsh pH
Stomach acidity cleaves and shreds protein

Protease attack
Proteases attack and break down proteins

Absorption barrier
Most therapeutic proteins fail to be absorbed via the intestinal wall (barrier)

Oramed Technology Protects Drug Integrity and Increases Absorption



pH shield for passage through stomach
pH sensitive enteric coating protects capsule contents.
Capsule dissolves only once in small intestine

Protease protection
Special cocktail of protease inhibitors stave off and protect the active agent from protease attack

Absorption enhancement
Assists the permeation of proteins/peptides across intestinal membrane and into bloodstream

Diabetes:
Millions of diabetics
inject insulin today
and wish for oral dosage

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1 in 12 People on the Planet Have Diabetes

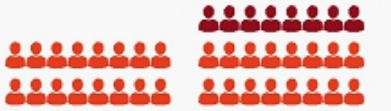
1 healthcare **in 9**

Is spent on diabetes

In 2014 diabetes expenditure reached US $ 612 billion

expected increase

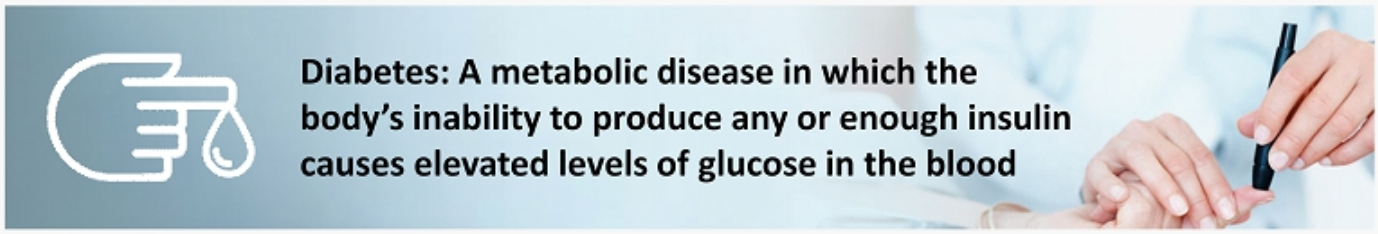
+205 MILLION



2014 2035

https://www.idf.org/worlddiabetesday/toolkit/gp/facts-figures

Type 1 and Type 2 Diabetes Are Different



Diabetes: A metabolic disease in which the body's inability to produce any or enough insulin causes elevated levels of glucose in the blood

TYPE 1 Diabetes

- **T1DM is autoimmune:** The body destroys its own insulin-producing (beta) cells, leaving patients completely dependent on external insulin sources
- **5-10% of diabetics have T1DM:** Up to 37 million people worldwide have T1DM
- **Projected Market:** $13 billion by 2023

TYPE 2 Diabetes

- **T2DM is metabolic:** The body becomes insulin resistant. Injections may be used to make up for the pancreas's inability to create sufficient insulin to keep blood sugar at normal levels
- **371 million people worldwide needing treatment**
- **Projected Market:** $39 billion by 2019

ORMD-0801:
Oramed's Flagship Product for Oral Treatment of Diabetes

~200
study subjects*

~2000
human doses*

Clean safety
profile

* Total number of study subjects: **196.** Total number of human doses: **2,063**

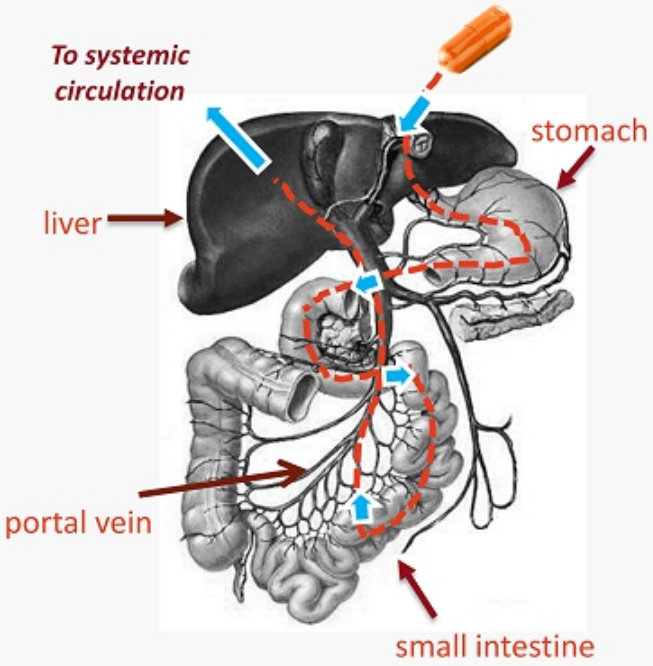
The Drawbacks of Injected Insulin vs. the Advantages of Oral Insulin

ENDOGENOUS INSULIN produced by the pancreas and delivered to the body via the liver

INJECTED INSULIN introduced directly to the bloodstream with only a fraction of it reaching the liver. This can cause excess sugar to be stored in fat and muscle which often results in weight gain. This may also cause hypoglycemia

ORAL INSULIN like natural insulin is delivered first to the liver. This should lead to:

- Better blood glucose control
- Reduced hypoglycemia: liver metabolizes 80%
- Reduced hyperglycemia: insulin closes down glucose overproduction/secretion
- Reduced weight gain (neutral): vs. SC insulin focus on glucose disposal leads to substantial weight gain



ORMD-0801:

Better type 2 diabetes (T2DM) treatment by interacting with the body like natural insulin

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The Type 2 Diabetes Treatment Paradigm

Stage 1:
Initial Treatment

- Lifestyle modification
- Diet & exercise

Stage 2:
Single & Combination Oral Therapies

- Reduce insulin resistance
- Stimulate insulin secretion

Stage 3:
Late-Stage Treatment

- Insulin (injections)

ADA guidance: Earlier use of insulin equals better outcome (source)

Excessive Production of Glucose at Night: A Significant Challenge in Diabetes Management

- Excessive nocturnal glucose production by the liver is frequently demonstrated in diabetes patients
- Results of high blood sugar are measured by a fasting blood sugar (FBG) test, done after an 8-hour fast. High FBG test results are a key concern in diabetes management
- **Treatment today is suboptimal: In only 20% of patients blood sugar is regulated with medication and return FBG to normal levels**

Simple Oral Administration at Bed Time Managing Diabetes

Oramed's first indication, ORMD-0801, reduces excessive nocturnal glucose production in the liver, by acting the same way that natural insulin does.

Key benefits

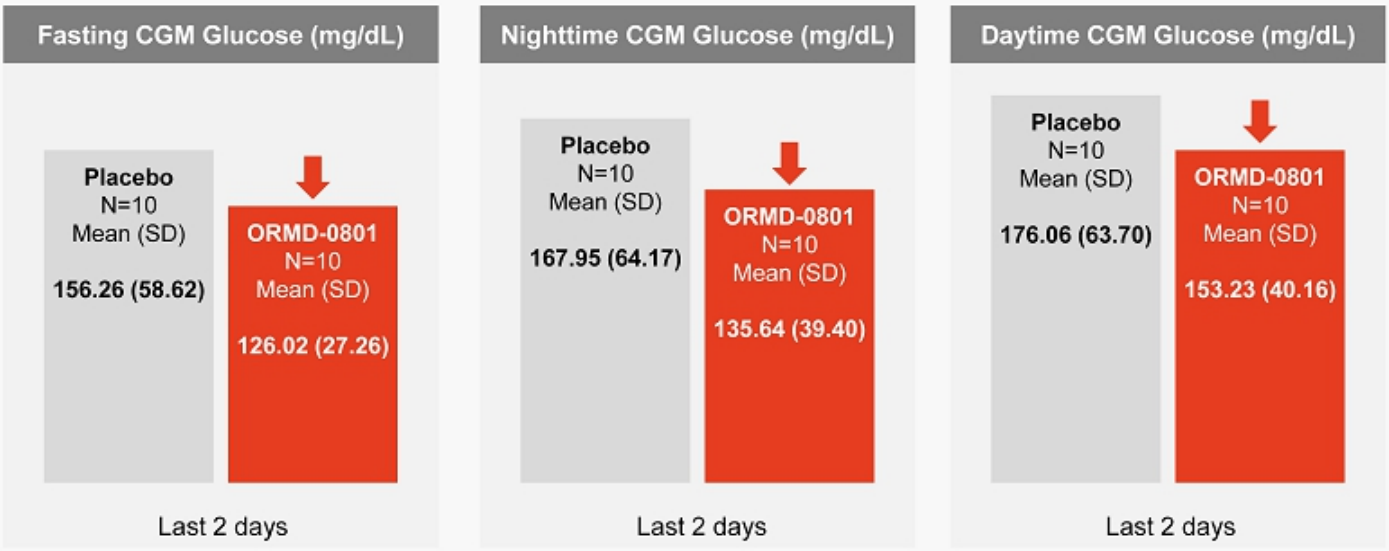
Reduction of FBG levels

Increased patient compliance via simple oral administration

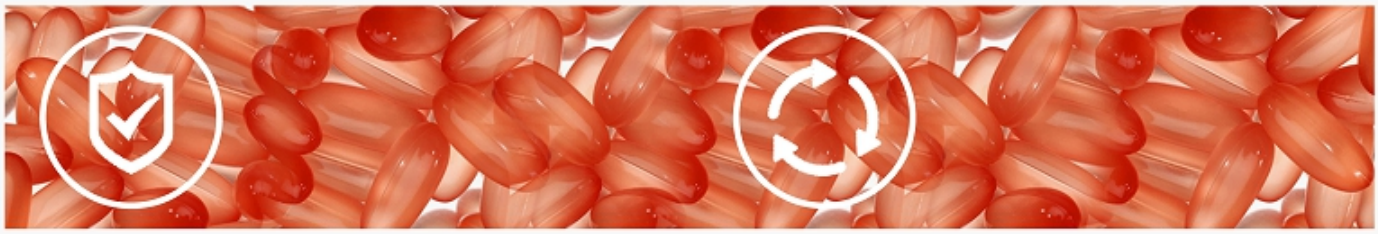
Slowing down the progression of diabetes

Phase IIa FDA Study:
ORMD-0801 Drug Safe With no Serious Adverse Events

- 30 T2DM patients
- Primary objective: Safety and tolerability
- Secondary objective: Pharmacodynamic effects on mean nighttime glucose



Phase IIa FDA Study:
ORMD-0801 Demonstrates Sustained Glucose Reduction



Safe and well tolerated

- Observed to be safe and well tolerated for dosing regimen
- No hypoglycemic events at any point during the study in any member of treatment group
- No related adverse events observed

Sustained glucose reduction

- Dose group showed a pronounced effect over placebo
- Sustained reduction observed at night, day and mean fasting glucose test

Ongoing 180 Patient FDA Phase IIb Study

- **>30** US sites
- **180** patients
- **28** day treatment
- **1** time a day at night

Primary objectives:

- Safety of ORMD-0801
- Evaluate PD effects of ORMD-0801 on mean night glucose

ORMD-0801
Type 1 Diabetes (T1DM):
Potentially eliminating the need for insulin before each meal

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Oramed: Potentially Superseding Bolus Replacement Therapy

T1DM patients are treated with 2 types of insulin replacement therapy

- Long-acting insulin (basal) helps maintain stable insulin levels during fasting periods
- Rapid-acting insulin (bolus) prior to each meal to stabilize blood sugar
- Administration is via injection or pump

Oramed seeks to replace the mealtime (bolus) insulin doses

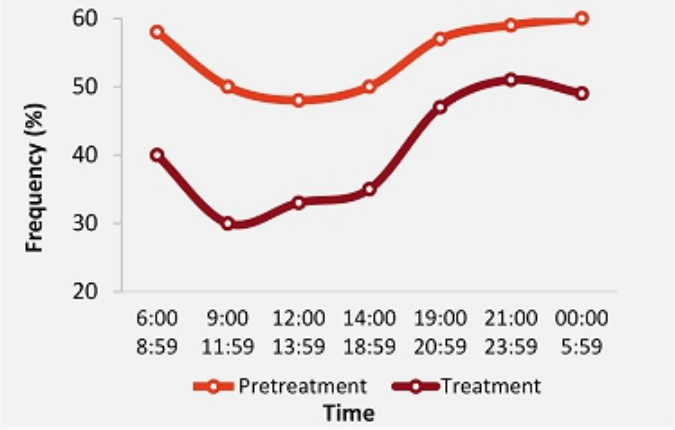
- Easier use and reduced systemic exposure
- Potentially reducing multiple daily injections
- Tighter regulation and control of blood sugar levels by directly targeting liver glucose, due to portal administration

ORMD-0801: Consistent Lowering of Glucose Levels - Day and Night in Preliminary Study

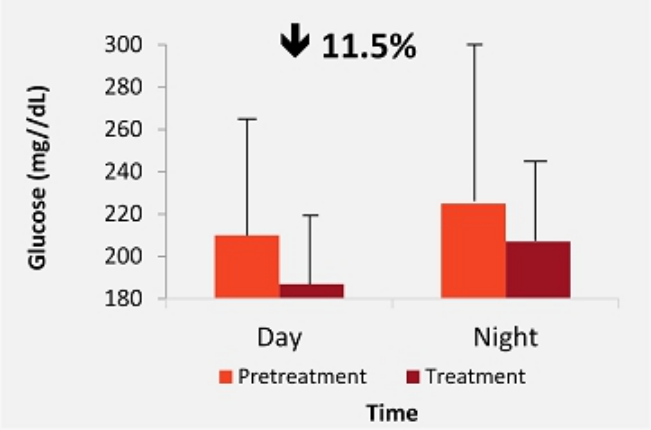
Design:

- Monitor glycemic stability of orally administered ORMD-0801
- Uncontrolled T1DM patients
- 1 capsule of 8 mg insulin administered before meals, three times daily at mealtime
- Continuous glucose monitoring

Frequency glucose >200mg/dL

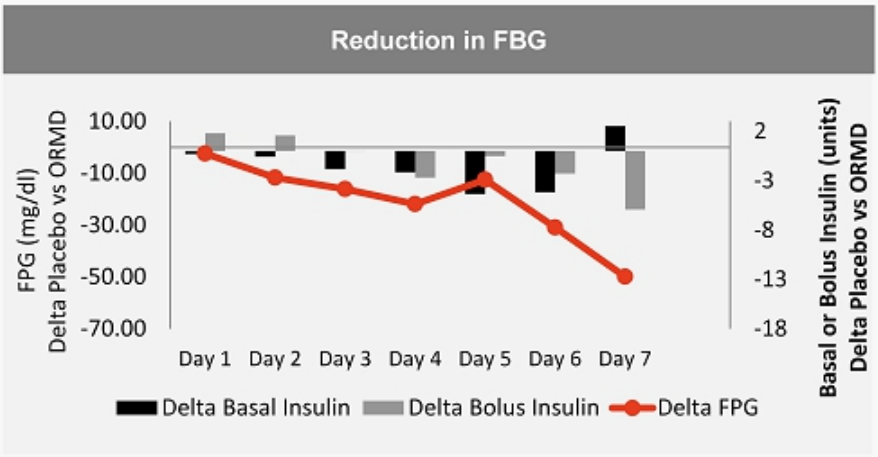


Mean glucose n=8



Phase IIa FDA Study:
Shows Consistent and Accumulative Effect of ORMD-0801

Blood glucose levels are lower, day and night, compared to control group



25 T1DM patients

7 days of treatment

3 times a day (at mealtime)

Primary objective: To evaluate the change in exogenous insulin requirements in T1DM patients

ORMD-0801: Phase IIa FDA Study Demonstrates Oral Insulin Reduces Exogenous Insulin Requirements

Safe and well tolerated for the pre-meal dosing regimen in this study.

Encouraging trends in key areas vs. placebo:

Decreased

use of rapid-acting insulin

levels of post-meal glucose

levels of daytime glucose

Increased

rate of mild hypoglycemia vs. placebo

China License Deal: 500M patient potential

- **License: Exclusive right to ORMD-0801 in Greater China**
- **Licensee: Hefei Tianhui ("HTIT")**
  Owns with Sinopharm a state-of-the-art GMP API insulin manufacturing facility
- **$50M Payments + Royalties:**
  - $12M in restricted stock (at premium)
  - $38M milestone payments
  - **10% royalties on net sales**

Chinese diabetes market*

114M **diabetic**
(12% of adult population)

~500M **prediabetic**
(50% of adult population)

* Journal of the American Medical Association

ORMD-0901:
Oral GLP-1 Analog

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GLP-1 Analog:
ORMD-0901 for Oral GLP-1 (TD2M)

GLP-1 Analog

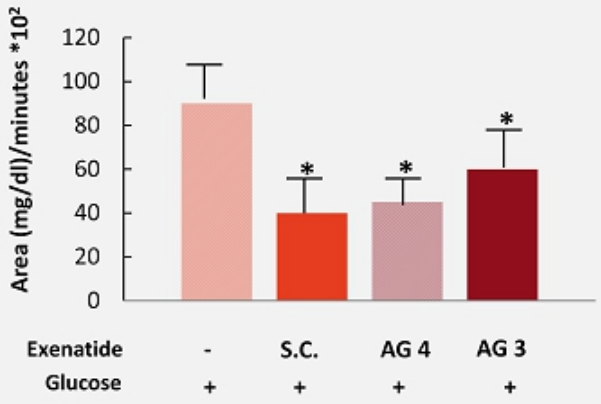
- T2DM medication
- Mimics the natural hormone in the body
- Good safety profile
- Decreases blood glucose levels
- Does not cause hypoglycemia
- Effectively reduces HbA1c
- Preserves beta cell function
- Promotes weight loss
- Current therapy is via injection only

ORMD-0901 Clinical Status

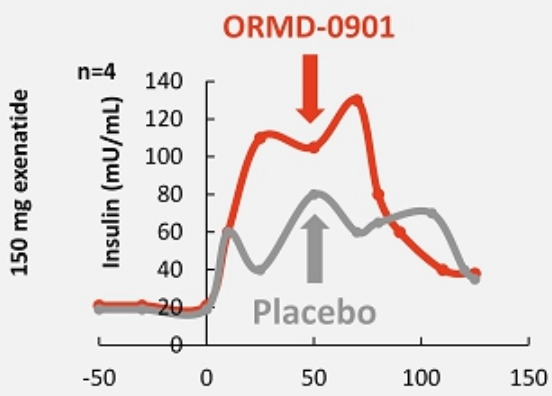
- IND-enabling tox studies in process
- Phase Ib ex-US study Q3, 2015
- Phase IIb US study Q4, 2016

Oral GLP-1 - ORMD-0901

Dogs: Subcutaneous exenatide delivery amounted to a 51% reduction in mean glucose



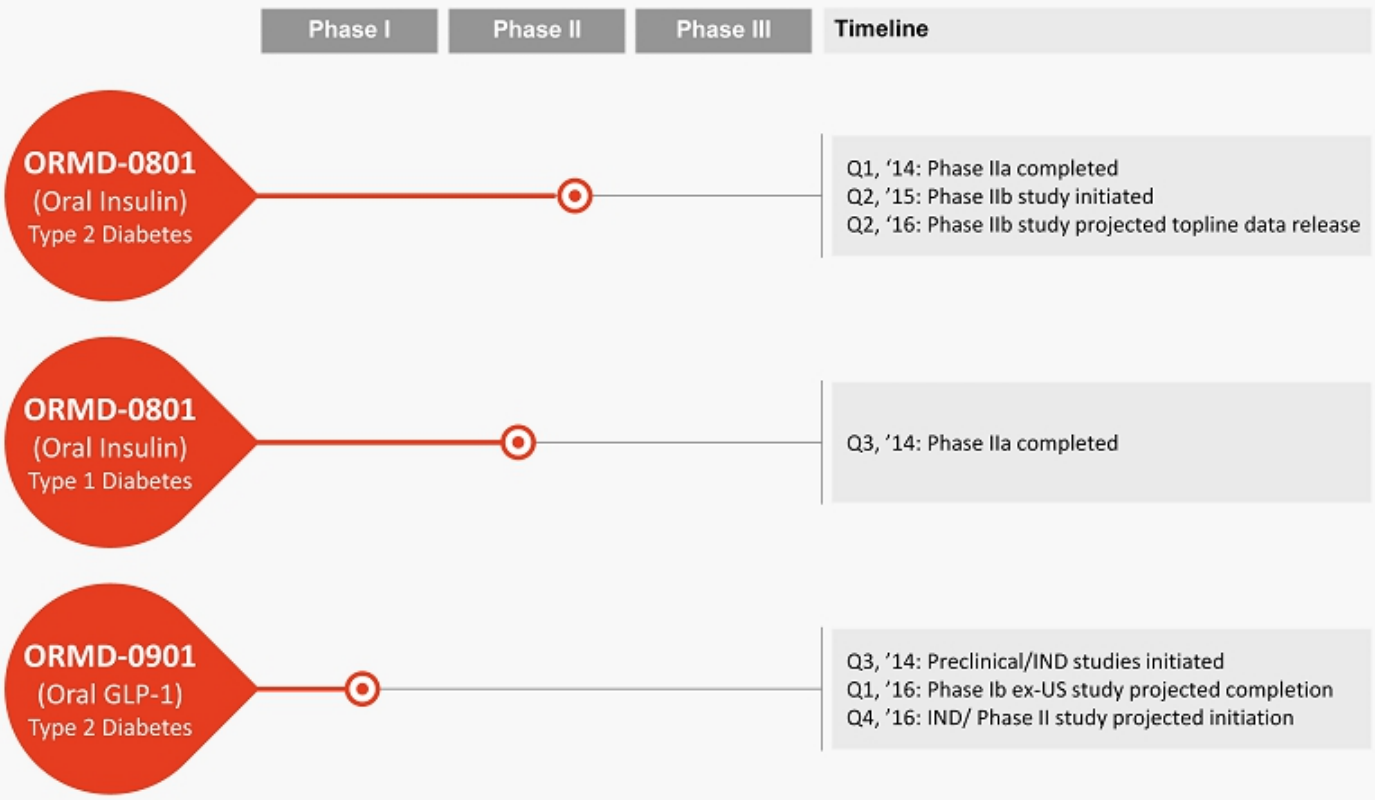
Human (4 healthy volunteers)



ORMD-0901 formulations

Preserved the biological activity of orally delivered exenatide. ORMD-0901 successfully curbed blood sugar excursions following glucose challenge

Rich Pipeline: Multiple Value-Creation Events



Corporate Overview:
On route to meet
unmet market needs

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Oramed (NASDAQ: ORMP): Corporate Overview[1]

Financial Highlights

- $39M cash and investments
- 13.1M shares outstanding (15.7M fully diluted[2])
- No Debt

Analyst Coverage

- Rodman & Renshaw (PT $25)
- Aegis Capital (PT $18)
- FBR & Co. (PT $15)
- Zacks (PT $25)

Intellectual Property Estate

- Methods and compositions for oral administration of proteins
- Methods and compositions for oral administration of exenatide
- Methods and compositions (insulin + exenatide)
- Improved protease inhibitors

[1] As of January 12, 2016.
[2] Including 1.7M options, 0.7M warrants and 0.3M RSUs

Lead Team

Management

Nadav Kidron, Esq, MBA - CEO & Director
Many years of business experience as well as corporate law and technology

Miriam Kidron, PhD - CSO & Director
Senior Researcher at the Diabetes Unit of Hadassah Medical Center for more than 25 years

Josh Hexter - COO, VP Bus. Dev.
More than 17 years of prominent leadership roles in biotech and pharma

Yifat Zommer, CPA, MBA - CFO
Extensive experience in corporate financial management

Board of Directors

Michael Berelowitz, MD
Chairman of Oramed SAB
SVP Clinical Development & Medical Affairs, Pfizer (former)

Harold Jacob, MD
Chief Medical Officer, Given Imaging (former)

Gerald Ostrov
CEO, Bausch&Lomb (former)
Senior level executive J&J (former)

Leonard Sank
Entrepreneur and business leader

Scientific Advisory Board

Michael Berelowitz, MD

Chairman of SAB

Former SVP Clinical Development and Medical Affairs, Specialty Care Business at Pfizer Inc.

Strong background in the Diabetes field

John Amatruda, MD

Former SVP and Franchise Head of the Diabetes and Obesity Unit at Merck & Co.

Avram Herskho, MD, PhD

Nobel Laureate, Chemistry, 2004

Distinguished professor in the biochemistry unit in the B. Rappaport Facility of Medicine, Technion, Haifa, Israel

Nir Barzilai, MD

Director for the Institute of Aging Research. Member of Diabetes Research Center, Albert Einstein University College of Medicine

Derek LeRoith, MD, PhD

Professor of Medicine and Chief of Endocrinology, Diabetes and Bone Disease Unit, Mount Sinai School of Medicine, NY

Ele Ferrannini, MD, PhD

Professor of Internal Medicine, University of Pisa School of Medicine. Professor of Medicine, Diabetes Unit Texas Health Science Center.

Past President of the EASD

Oramed: Addressing the Multibillion-Dollar Injectable Drug Markets with Oral Formulations

- **Proprietary platform** for oral delivery of drugs, proven in clinical studies
- **Initially targeting the lucrative insulin market.** Additional huge markets in the pipeline
- **Strong lead team** backed by globally prominent scientific experts
- **Value creating events until the end of 2016**
  - **Insulin/T2DM:** Completion of Phase IIb multi-site study
  - **GLP-1 Analog:** Completion of Phase Ib ex-US study followed by initiation of Phase II US multi-site study
  - **Big Pharma:** Feasibility Study underway with the proprietary compound of a big pharma company

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