FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: 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

| Name and Address of Reporting Person* ORLEV CHAIME | | | | | OF | 2. Issuer Name and Ticker or Trading Symbol ORAMED PHARMACEUTICALS INC. [ORMP] | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) Director | | | | |
|--|---|--|---|--------------------------------|---|---|----------------------------------|--|------------------------|---|---|--|---|--|---|--|---|
| (Last) (First) (Middle) 10 HAMEYADSIM ST | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/22/2009 | | | | | | | | A below) below) CFO, TREASURER AND SECRETARY | | | | |
| (Street) KIRYAT ONO L3 55521 (City) (State) (Zip) | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 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 Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| Date | | | | | ate Ex Month/Day/Year) if a | | f any Code Month/Day/Year) 8) | | Transacti Code (Ins | Dispose 5) | (A) or | | | Securities Beneficially Owned Following Reported Transportion(s) | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 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) | vative Conversion Date Executio urity or Exercise (Month/Day/Year) if any | | 3A. Deemed Execution I if any (Month/Day | Date, Transaction Code (Instr. | | of Deriving Securing Acquing (A) or Dispoing of (D) (Instr. and 5 | | | | Amou Securi Under Deriva Securi and 4) | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares | | rice of vative urity tr. 5) | 9. Number of derivative Securities Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

Remarks:

Due to resignation of the undersigned as CFO

/s/ Chaime Orlev 04/22/2009

** 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.