Edgar Filing: Danziger Asaf - Form 4

Danziger Asaf

Form 4	0										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL				
Check th		RITIES A shington			OMMISSION	OMB Number:	3235-0287				
if no lon subject to Section 1 Form 4 of Form 5	ger STA 16. 07		ENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES uant to Section 16(a) of the Securities Exchange Act of 1934,							January 31, 2005 verage rs per 0.5	
obligations may continue. See Instruction 1(b).											
(Print or Type)	Responses)										
1. Name and Address of Reporting Person <u>*</u> Danziger Asaf			2. Issuer Name and Ticker or Trading Symbol NovoCure Ltd [NVCR]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) C/O NOVOCURE INC., 20 VALLEY STREAM PARKWAY, SUITE 300			3. Date of Earliest Transaction (Month/Day/Year) 07/06/2018					XDirector10% Owner XOfficer (give titleOther (specify below) below) Chief Executive Officer			
File				If Amendment, Date Original iled(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 			
	N, PA 19355	(7:-)						Person			
(City)	(State)	(Zip)					-	uired, Disposed of		•	
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			n Date, if					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D)	Price \$	Transaction(s) (Instr. 3 and 4)			
Ordinary Shares (1)	07/06/2018			А	795	А	17.255 (2)	70,113	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	Number	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	-				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
				<u> </u>					of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Danziger Asaf C/O NOVOCURE INC. 20 VALLEY STREAM PARKWAY, SUITE 300 MALVERN, PA 19355	Х		Chief Executive Officer			
Signatures						
By: /s/ Kimberly Burke, Attorney in fact for Asaf Danziger		07/10/20	018			
**Signature of Reporting Person		Date				
Explanation of Responses:						

* 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).

- The reporting person is voluntarily reporting the acquisition of shares of the issuer's ordinary shares pursuant to the NovoCure Limited
 (1) Employee Share Purchase Plan ("ESPP"), for the ESPP purchase period of January 1, 2018 through June 30, 2018. This transaction is also exempt under Rule 16b-3(c).
- (2) In accordance with the ESPP, these shares were purchased based on 85% of the closing price of the issuer's ordinary shares on January 2, 2018.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.