

ReWalk Robotics Ltd.
Form 3
December 31, 2015

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2015
Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * Â MUIR GLENN P (Last) (First) (Middle)	2. Date of Event Requiring Statement (Month/Day/Year) 12/31/2015	3. Issuer Name and Ticker or Trading Symbol ReWalk Robotics Ltd. [RWLK]	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
--	--	--	--	--

C/O REWALK ROBOTICS LTD.,Â 3 HATNUFA ST., P.O. BOX 161
(Street)

(Check all applicable)

Director 10% Owner
 Officer Other
(give title below) (specify below)

YOKNEAM ILIT,Â L3Â 20692203
(City) (State) (Zip)

6. Individual or Joint/Group Filing(Check Applicable Line)
 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)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Ordinary Shares, par value NIS 0.01 per share	6,022 ⁽¹⁾	I	ESOP

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	--	---------------------------	----------------------	--

Edgar Filing: ReWalk Robotics Ltd. - Form 3

	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	
Option (Right to buy)	Â (2)	12/15/2024	Ordinary Shares	12,546	\$ 20.77	D	Â
Option (Right to buy)	Â (3)	12/03/2025	Ordinary Shares	4,176	\$ 7.3	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
MUIR GLENN P C/O REWALK ROBOTICS LTD. 3 HATNUFA ST., P.O. BOX 161 YOKNEAM ILIT, L3 20692203	Â X	Â	Â	Â

Signatures

/s/ Kevin Hershberger as attorney-in-fact 12/31/2015

__Signature of Reporting Person

Date

Explanation of Responses:

* 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).

- (1) Represents 6,022 Ordinary Shares issuable upon the vesting of restricted stock units ("RSUs") granted under the ReWalk 2014 Equity Incentive Plan on December 15, 2014. One-third, or 2,007 Ordinary Shares, of the RSUs vested on the first anniversary of the date of grant and the remaining RSUs vest in equal quarterly installments of 501 Ordinary Shares each starting one quarter following the first anniversary of the date of grant.
- (2) Represents stock options granted under the ReWalk 2014 Equity Incentive Plan on December 15, 2014. The options become vested and exercisable in 12 equal quarterly installments starting three months following the date of grant.
- (3) Represents stock options granted under the ReWalk 2014 Equity Incentive Plan on December 3, 2015. The options become vested and exercisable in four equal quarterly installments starting three months following the date of grant.

Â

Remarks:

Exhibit 24.1 - Power of Attorney

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.