FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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Nachington	D.C	20549	a		

OMB APF	PROVAL					
OMB Number:	3235-0287					
Estimated average	burden					

0.5

hours per response:

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

100	Check this box to indicate that a
	transaction was made pursuant to a
	contract, instruction or written plan
	for the purchase or sale of equity
	securities of the issuer that is
	intended to satisfy the affirmative
	defense conditions of Rule 10h5-

	ee Instruction 1																		
	nd Address of r Randel	Reporting Person	•						er or Ti L <mark>FWD</mark>		Symbol			(Chec	k all app	,		,	
recente	<u>r reament</u>													1	Direc			0% O\	
(Last) (First) (Middle) C/O LIFEWARD LTD.						3. Date of Earliest Transaction (Month/Day/Year) 12/13/2024									Office	er (give title v)		Other (s elow)	specify
		ICH BLVD.																	
200 DOI	NALD LIN	CH BLVD.			4. If /	Amendı	nent, I	Date c	f Origin	al File	ed (Month/Da	y/Year)			vidual o	r Joint/Grou	p Filing (C	neck A	pplicable
(Street)														Line)	Form	filed by On	e Reportin	a Pers	on
MARLB	OROUGH	MA	01752													filed by Mo		•	
(City)	(St	ate) (Zip)																
		Table	I - No	on-Deriva	tive \$	Secur	ities	Acq	uired	l, Dis	posed of	, or B	enef	icially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Execution Date,		·			Disposed Of	ities Acquired (A) or d Of (D) (Instr. 3, 4 and			nd Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Pric	e		ted action(s) 3 and 4)			(Instr. 4)
Ordinary Shares, par value NIS 1.75 per share			12/13/2	024				S		4,285(1)	D	\$1	.6836	0(2)		I		Richner- Russell Family Trust ⁽³⁾	
Ordinary Shares, par value NIS 1.75 per share													21	,567(2)	I		ESOP		
		Та	ble II								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execu	A. Deemed xecution Date, any Month/Day/Year)		action (Instr.	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr	Expiration (Month/Dirities ired cosed cose		tion D		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Der Sed (Ins	Price of rivative curity str. 5)	tive derivative sty Securities	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	n: ct (D) direct	11. Nature of Indirec Beneficia Ownershi (Instr. 4)
						v	(A) (D)		Date Evercisable		Expiration	Title	Amou or Number of	er					

Explanation of Responses:

- 1. Represents Ordinary Shares sold in the open market on December 13, 2024.
- 2. The reported number of shares has been adjusted to reflect the impact of the Issuer's 1-for-7 reverse share split, which became effective on March 15, 2024.
- 3. These securities are held in a family trust for the benefit of the reporting person and her spouse. The reporting person and her spouse are co-trustees of the trust. The reporting person disclaims beneficial ownership of the securities held by the Richner-Russell Family Trust except to the extent of her pecuniary interest therein.

/s/ Randel Richner 12/17/2024

** 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.