Danziger Asaf Form 4 March 01, 2019

FORM 4

OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Danziger Asaf	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer		
	NovoCure Ltd [NVCR]	(Check all applicable)		
(Last) (First) (Middle)	3. Date of Earliest Transaction			
C/O NOVOCURE INC., 20 VALLEY STREAM PARKWAY, SUITE 300	(Month/Day/Year) 02/27/2019	X Director 10% OwnerX Officer (give title Other (specify below) Chief Executive Officer		
(Street)	4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		

Filed(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

Person

MALVERN, PA 19355

Shares

(City)	(State)	(Zip) Tab	le I - Non-I	Derivative	Secu	rities Acqu	ired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Ordinary Shares	02/27/2019		M	9,260	A	\$ 52.9	233,757	D	
Ordinary Shares	02/28/2019		M	903 (1)	A	\$ 14.37	234,660	D	
Ordinary	02/28/2019		S	903	D	\$ 54.395	233,757	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 (9-02)

(2)

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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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number 6. Date Exert Expiration Expiratio		e	7. Title and of Underlyin Securities (Instr. 3 and	ng
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units	\$ 0	02/27/2019		M	9,260	02/27/2019	(3)	Ordinary Shares	9,260
Options to Buy Ordinary Shares	\$ 14.37	02/28/2019		M	903	<u>(4)</u>	02/23/2025	Ordinary Shares	903

Reporting Owners

Reporting Owner Name / Address	Keiationsinps				
,	Director	10% Owner	Officer	Other	
Danziger Asaf C/O NOVOCURE INC. 20 VALLEY STREAM PARKWAY, SUITE 300 MALVERN, PA 19355	X		Chief Executive Officer		

Signatures

By: /s/ Kimberly Burke, Attorney in fact for Asaf Danziger 03/01/2019 Date

**Signature of Reporting Person

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).
- (1) These shares were sold pursuant to a Rule 10b5-1 trading plan adopted by Mr. Danziger.
- (2) On February 28, 2019, pursuant to a Rule 10b5-1 trading plan adopted by Mr. Danziger, Mr. Danziger sold 903 shares in multiple trades at prices ranging from \$54.37 to \$54.44. The price reported above reflects the weighted average sale price. Mr. Danziger hereby undertakes to provide to the Staff, the issuer or any security holder of the issuer, upon request, full information regarding the number of

Reporting Owners 2

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shares and prices at which the transaction was effected.

- (3) Fully vested as of the date hereof.
- (4) Fully vested and currently exercisable as of the date hereof.

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.