Naos Yaron Form 3 June 08, 2018

FORM 3

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

OMB APPROVAL

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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 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement Protalix BioTherapeutics, Inc. [PLX] Naos Yaron (Month/Day/Year) 05/29/2018 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) C/O PROTALIX (Check all applicable) BIOTHERAPEUTICS, INC., Â 2 SNUNIT STREET, SCIENCE 10% Owner Director **PARK #455** _X__ Officer Other (give title below) (specify below) (Street) 6. Individual or Joint/Group Sr. VP, Operations Filing(Check Applicable Line) _X_ Form filed by One Reporting Person CARMIEL, L3Â 20100 Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 4) (Instr. 5) Form: Direct (D) or Indirect (Instr. 5) Â Common Stock D 71,125 Common Stock 128,438 I By Trust (1) Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) 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

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

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1. Title of Derivative Security (Instr. 4)	2. Date Exerc Expiration D (Month/Day/Year)		3. Title and A Securities Un Derivative Se (Instr. 4)	derlying	4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security Direct (I or Indire (I)	Security: Direct (D) or Indirect (I) (Instr. 5)	
Stock Options (Right to Buy)	(2)	02/25/2019	Common Stock	50,000	\$ 2.65	D	Â
Stock Options (Right to Buy)	(3)	02/25/2020	Common Stock	115,000	\$ 6.9	D	Â
Stock Options (Right to Buy)	(4)	03/23/2025	Common Stock	50,000	\$ 1.72	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
Naos Yaron						
C/O PROTALIX BIOTHERAPEUTICS, INC.	Â	Â	Sr. VP, Operations	Â		
2 SNUNIT STREET, SCIENCE PARK #455	А	А	A SI. VI, Operations	А		
CARMIEL, L3 20100						

Signatures

/s/ Yaron Naos 06/08/2018

**Signature of Date
Reporting Person

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) To qualify for certain tax benefits under Section 102 of the Israeli Tax Ordinance, securities issued to an employee in connection with the Protalix BioTherapeutics, Inc. Amended and Restated 2006 Stock Incentive Plan (the "Plan") must be registered in the name of a trustee.
- (2) The options are fully vested.
- (3) The options are fully vested.
- 25% of the shares of common stock underlying the stock options vested on the first one-year anniversary of the date of grant and the remaining 75% of the shares of common stock underlying the stock options vest in 12 equal quarterly installments commencing on such anniversary. The stock options are subject to accelerated vesting upon a corporate transaction or a change in control as described in the

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.

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