

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF  
SECURITIESFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934  
or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>SCP Vitalife Partners II LP</u>	2. Date of Event Requiring Statement (Month/Day/Year) 12/31/2015	3. Issuer Name and Ticker or Trading Symbol <u>ReWalk Robotics Ltd. [ RWLK ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year)
(Last) (First) (Middle) 7 GREAT VALLEY PARKWAY, SUITE 190			6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person
(Street) MALVERN PA 19355-1446			
(City) (State) (Zip)			

## 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	1,251,557	D <sup>(1)</sup>	

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 (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Warrants	07/14/2014	07/14/2018	Ordinary Shares	22,374	11.45	D <sup>(1)</sup>	

1. Name and Address of Reporting Person* <u>SCP Vitalife Partners II LP</u>		
(Last)	(First)	(Middle)
7 GREAT VALLEY PARKWAY, SUITE 190		
(Street)		
MALVERN	PA	19355-1446
(City) (State) (Zip)		

1. Name and Address of Reporting Person* <u>SCP Vitalife II Associates, L.P.</u>		
(Last)	(First)	(Middle)
7 GREAT VALLEY PARKWAY, SUITE 109		
(Street)		
MALVERN	PA	19355-1446
(City) (State) (Zip)		

1. Name and Address of Reporting Person* <u>SCP Vitalife II GP, Ltd.</u>		
(Last)	(First)	(Middle)
7 GREAT VALLEY PARKWAY, SUITE 109		
(Street)		
MALVERN	PA	19355-1446
(City) (State) (Zip)		

1. Name and Address of Reporting Person\*

CHURCHILL WINSTON J

(Last) (First) (Middle)

7 GREAT VALLEY PARKWAY, SUITE 109

(Street)

MALVERN PA 19355-1446

(City) (State) (Zip)

1. Name and Address of Reporting Person\*

LUDOMIRSKI ABRAHAM

(Last) (First) (Middle)

7 GREAT VALLEY PARKWAY, SUITE 109

(Street)

MALVERN PA 19355-1446

(City) (State) (Zip)

**Explanation of Responses:**

1. The Ordinary Shares and Warrants to purchase Ordinary Shares are directly held by SCP Vitalife Partners II, L.P. ("SCP Vitalife") and indirectly held by SCP Vitalife II Associates, L.P. ("SCP Vitalife Associates"), the sole general partner of SCP Vitalife, SCP Vitalife II, GP, Ltd. ("SCP Vitalife GP"), the sole general partner of SCP Vitalife Associates, and the individual directors of SCP Vitalife GP (SCP Vitalife Associates, SCP Vitalife GP and the individual directors of SCP Vitalife GP together, the "SCP Vitalife Indirect Reporting Persons"). The individual directors of SCP Vitalife GP are Jeffrey Dykan, Winston J. Churchill, Abraham Ludomirski and Wayne B. Weisman. The SCP Vitalife Indirect Reporting Persons disclaim beneficial ownership within the meaning of Section 16 of the Securities Exchange Act of 1934, as amended, or otherwise of such portion of the SCP Vitalife Ordinary Shares and Warrants in which the SCP Vitalife Indirect Reporting Persons have no pecuniary interest.

/s/ Winston J. Churchill,  
attorney-in-fact

12/31/2015

\*\* 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 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).

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.**