

Cohen Assaf
Form 3
March 07, 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 Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Cohen Assaf		(Month/Day/Year)	ON TRACK INNOVATIONS LTD [OTIV]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
Z.H.R. INDUSTRIAL ZONE,			(Check all applicable)	
P.O. BOX 32			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
(Street)			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
ROSH PINA,Â L3Â 1200000			(give title below)	(specify below)
(City)	(State)	(Zip)	Chief Financial Officer	6. Individual or Joint/Group Filing(Check Applicable Line)
				<input checked="" type="checkbox"/> Form filed by One Reporting Person
				<input type="checkbox"/> 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)
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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 (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

(Instr. 5)

Options (right to buy)	Â (1)	11/11/2020	Ordinary Shares	10,000	\$ 0.74	D	Â
Options (right to buy)	Â (2)	11/30/2021	Ordinary Shares	15,000	\$ 1.07	D	Â
Options (right to buy)	Â (3)	11/27/2022	Ordinary Shares	15,000	\$ 1.21	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Cohen Assaf Z.H.R. INDUSTRIAL ZONE, P.O. BOX 32 ROSH PINA,Â L3Â 1200000	Â	Â	Â Chief Financial Officer	Â

Signatures

/s/ Assaf Cohen 03/07/2018

__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).

The option is exercisable in three equal installments. The first and second installments became exercisable on 11/11/2016 and (1) 11/11/2017, respectively, and the last installment becomes exercisable on 11/11/2018, all subject to the terms and provisions of the Issuer's 2001 Share Option Plan, as amended.

The option is exercisable in three equal installments. The first installment became exercisable on 11/30/2017, and the next two (2) installments become exercisable on 11/30/2018 and 11/30/2019, all subject to the terms and provisions of the Issuer's 2001 Share Option Plan, as amended.

(3) The option is exercisable in three equal installments, on 11/28/2018, 11/28/2019 and 11/28/2020, all subject to the terms and provisions of the Issuer's 2001 Share Option Plan, as amended.

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.