FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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| ato | n DC | 20549 |     |      |    |        |     |     |

| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| 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           |
| Ш | obligations may continue. See          |
|   | Instruction 1(b).                      |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed 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>Cavanaugh Stefanie L.</u>  |   |  |   |                            | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Aspira Women's Health Inc. [ AWH ]  |   |         |  |  |        |                 |  | Relationship<br>eck all appl<br>X Direct                          |             |   |   |  |                                       |  |  |
|--|---|--|---|----------------------------|--|---|---------|--|--|--------|-----------------|--|---|-------------|---|---|--|---------------------------------------|--|--|
| (Last)   | (Firs   |  | liddle)                                       |                            |  | 3. Date of Earliest Transaction (Month/Day/Year) 06/01/2023 |         |  |  |        |                 |  |   |             |   | r (give title   | c  | 10% Owner<br>Other (specify<br>below) |  |  |
| C/O ASPIRA WOMEN'S HEALTH INC<br>12117 BEE CAVES RD BLDG 3 STE 100   |   |  |   |                            | 4. If Amendment, Date of Original Filed (Month/Day/Year)   |   |         |  |  |        | Line            | e)   | vidual or Joint/Group Filing (Check Applicable                    |             |   |   |  |                                       |  |  |
| (Street)   |   |  |   |                            |  |   |         |  |  |        |                 |  |   |             |   | Form filed by One Reporting Person  Form filed by More than One Reporting Person                |  |                                       |  |  |
|  |   |  |   |                            | Rule 10b5-1(c) Transaction Indication  |   |         |  |  |        |                 |  |   |             |   |   |  |                                       |  |  |
| (City) (State) (Zip)   |   |  |   |                            | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |   |         |  |  |        |                 |  |   |             |   |   |  |                                       |  |  |
|  |   | Table                                      | I - Nor                                       | -Deriva                    | ative  | Secu  | ırities | s Acq                                      | uired,   | Dis    | posed o         | f, o   | r Ben   | eficia      | illy Own  | ed  | ,  |                                       |  |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)  |   |  |   | Execution Date,            |  | Transaction Disposed Code 5)                                |         | ties Acquired (A)<br>I Of (D) (Instr. 3, 4 |  |        | Benefi<br>Owned | ties<br>cially<br>Following  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |             | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |  |                                       |  |  |
|  |   |  |   |                            |  |   |         | Code                                       | v  | Amount |                 | (A) or<br>(D)  | Price   | Transa      | Reported<br>Transaction(s)<br>(Instr. 3 and 4)                    |   |  | (instr. 4)                            |  |  |
| Common Stock 06/01/  |   |  |   |                            | /2023  |   |         |  | A  |        | 28,623(1)       |  | Α   | \$ <b>0</b> | 2   | 28,623  |  |                                       |  |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |  |   |                            |  |   |         |  |  |        |                 |  |   |             |   |   |  |                                       |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deeme<br>Execution<br>if any<br>(Month/Da | Date, Transact<br>Code (In |  |   |         |  | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |        | te              | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instrand 4) |   |             | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)               | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr.<br>4) | (D)                                   | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |   |  | Cada  | v                          | (0)  | (5)   | Date    |  | Expiration   | Tial-  | or              | nber   |   |             |   |   |  |                                       |  |  |

## **Explanation of Responses:**

1. 6,401 of the restricted stock units will vest on June 1, 2023, 11,111 of the restricted stock units will vest on September 1, 2023 and 11,111 of the restricted stock units will vest on December 1, 2023.

/s/ Stefanie Cavanaugh

06/02/2023

\*\* 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.