FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 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>Beechey Robert Harry</u>					Asp	2. Issuer Name and Ticker or Trading Symbol Aspira Women's Health Inc. [AWH]								k all applica: Director			on(s) to Issu		
(Last)	(Fi	rst) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/19/2021							\ \ \	below)			Other (specify below)		
C/O ASPIRA WOMEN'S HEALTH INC														Ch	ief Finar	ncial (Officer		
12117 BEE CAVES RD BLDG 3 STE 100					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)													>	Form filed by One Reporting Person					
AUSTIN	TX		78738											Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)																
		Table I	Non-D	erivat	ive S	ec	urities	Acc	quired,	Dis	posed	of, or B	enefic	ially Ow	ned				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Da						Execution Date, it		f Transaction Disposed Code (Instr.		ties Acquired (A) or Of (D) (Instr. 3, 4 and !		5. Amount Securities Beneficial Owned Fo Reported	Form (D) or		Direct I Indirect I tr. 4)	7. Nature of Indirect Beneficial Ownership Instr. 4)			
									Code	v	Amount (A) or (D)		Price	Transactio				,	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Conversion or Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D any (Month/Day	Date, if	4. Fransact Code (In: B)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reporter	re es ally eg	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
													Amount or		Transaction(s) (Instr. 4)				
				-	Code	v	(A)	(D)	Date Exercisable	Da	piration te	Title	Number of Shares						
EMPLOYEE STOCK OPTION (RIGHT TO BUY)	\$7.4	03/19/2021			А		150,000		(1)	03.	/19/2031	Common stock	150,000	\$0	150,0	00	D		

Explanation of Responses:

1. The option vests in four equal annual installments beginning on March 19, 2022.

/s/ Robert Beechey

03/23/2021

** Signature of Reporting Person

Data

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly.$

- $\mbox{{\form}}$ If the form is filed by more than one reporting person, $\it see$ 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.