## FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104

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## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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*  Merchant Minh Hoang  (Last) (First) (Middle)  C/O ASPIRA WOMEN'S HEALTH INC.  12117 BEE CAVES ROAD, BLDG 3, STE 100		2. Date of Event Requiring Statement (Month/Day/Year) 06/23/2022	3. Issuer Name <b>and</b> Ticker or Trading Symbol Aspira Women's Health Inc. [ awh ]				
			4. Relationship of Relationship	_	rson(s) to	5. If Amendment, Date of Original Filed (Month/Day/Year)	
			(Check all applicable Director  X Officer (give title below)  General Count	10% Oth (spe belo	cify ow)	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person	
(Street) AUSTIN CA 7873	8						
(City) (State) (Zip)							
Table I - Non-Derivative Securities Beneficially Owned							
1. Title of Security (Instr. 4)			2. Amount of Securi Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Stock			20,000	D			
Common Stock			14,700	I		By spouse	
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 Securities Underlyin Derivative Security (	g	4. Conversion	ise Form:	6. Nature of Indirect Beneficial
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivativ Security	Direct (D) or Indirect (I) (Instr. 5)	Ownership (Instr. 5)
EMPLOYEE STOCK OPTION (RIGHT TO BUY)	(1)	01/04/2032	COMMON STOCK	150,000	1.08	D	

## **Explanation of Responses:**

1. The option vests in four equal annual installments beginning on January 4, 2023.

/s/ Minh Hoang Merchant

07/01/2022

\*\* 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.