SEC Form 4	
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### FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

# OMB APPROVAL OMB Number: 3235-0287 Estimated average hurden

Estimated average burden	
hours per response:	0.5

1. Name and Address of Reporting Person <sup>*</sup> Almon Einat Brill			2. Issuer Name <b>and</b> Ticker or Trading Symbol Protalix BioTherapeutics, Inc. [ PLX ]		tionship of Reporting Pe all applicable) Director	rson(s) to Issuer 10% Owner		
(Last) (First) (Middle) C/O PROTALIX BIOTHERAPEUTICS, INC.			3. Date of Earliest Transaction (Month/Day/Year)           05/18/2009	X	Officer (give title below) VP, Product Dev	Other (specify below) velopment		
2 SNUNIT STREET, SCIENCE PARK, POB 455		CE PARK, POB 455	4. If Amendment, Date of Original Filed (Month/Day/Year)	6 Indiv	dividual or Joint/Group Filing (Check Applicable			
(Street) CARMIEL				Line)	Form filed by One Rep Form filed by More that Person	porting Person		
(City)	(State)	(Zip)						

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V Amount (A) or Price		Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)				
Common Stock	05/18/2009		М		44,707	A	\$0.399	44,707	Ι	By trust <sup>(1)</sup>		
Common Stock	05/18/2009		F		4,707	D	\$3.79	40,000	I	By trust <sup>(1)</sup>		
Common Stock	05/18/2009		S		40,000	D	\$4	0	Ι	By trust <sup>(1)</sup>		

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

				•											
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Deri Sec Acq (A) ( Disp of (I	umber ivative urities uired or oosed O) (Instr. and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		te of Securities		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Options (Right to Buy)	\$0.399	05/18/2009		М			44,707	(2)	05/23/2016	Common Stock	44,707	\$0	158,516 <sup>(3)</sup>	D	

Explanation of Responses:

1. To qualify for certain tax benefits under Section 102 of the Israeli Tax Ordinance, securities issued to an employee upon the exercise of stock options must be registered in the name of a trustee. 2. All these options are fully vested.

3. Does not include options to purchase 50,000 shares of common stock at an exercise price equal to \$2.65 per share that expire on February 25, 2019, does not include 232,108 shares of common stock at an exercise price equal to \$0.972 per share that expire on August 13, 2016 and does not include options to purchase 311,272 shares of common stock at an exercise price equal to \$5.00 per share that expire on February 7, 2018.

\*\* 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.