

Kohavi Lior  
Form 3  
January 02, 2019

**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)

<p>1. Name and Address of Reporting Person *</p> <p>Â Kohavi Lior</p> <p>(Last) (First) (Middle)</p> <p>C/O CYREN INC.,Â 1430 SPRING HILL ROAD, SUITE 330</p> <p>(Street)</p> <p>MCLEAN,Â VAÂ 22102</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>01/01/2019</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>CYREN Ltd. [CYRN]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) CHIEF TECHNOLOGY OFFICER</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person</p>
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**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)
Ordinary Shares	120,661 <sup>(1)</sup>	D	Â
Ordinary Shares	24,524	I	By spouse
Ordinary Shares	50,000	I	By Trust <sup>(2)</sup>
Ordinary Shares	50,000	I	By Trust <sup>(2)</sup>
Ordinary Shares	50,000	I	By Trust <sup>(2)</sup>

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

SEC 1473 (7-02)

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- (6) These options are fully vested and immediately exercisable.
- (7) These options are fully vested and immediately exercisable.

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**Remarks:**

Exhibit 24: Power of Attorney

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.

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