

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>Hirsch Stanley</u> _____ (Last) (First) (Middle) <u>C/O FOAMIX PHARMACEUTICALS LTD.</u> <u>2 HOLTZMAN STREET</u> _____ (Street) <u>REHOVOT L3 7670402</u> _____ (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Foamix Pharmaceuticals Ltd. [ FOMX ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner <input type="checkbox"/> Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>07/13/2018</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

**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)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Ordinary Shares	07/13/2018		M		1,616	A	\$0.00 <sup>(1)</sup>	12,974 <sup>(2)</sup>	D	

**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. Transaction Code (Instr. 8)		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 Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	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					
Restricted Share Units <sup>(1)</sup>	\$0.00	07/13/2018		M		1,616		(3)	(3)	Ordinary Shares	\$0	0 <sup>(4)</sup>	D	

**Explanation of Responses:**

- This security represents restricted share units. Each restricted share unit represents a contingent right to receive one ordinary share of the issuer.
- The issuer's method of reporting restricted share units has been revised to report such grants in Table I rather than as previously reported in Table II. Accordingly, this amount includes (i) 6,508 ordinary shares previously reported in Table I of the reporting person's Form 4 (ii) 1,616 ordinary shares underlying restricted share units that vested on July 13, 2018 (iii) 4,850 ordinary shares subject to unvested restricted share units that were previously reported in Table II of the reporting person's Form 3 as a derivative security.
- The ordinary shares underlying this restricted share unit award vest over a period of four years (25% on July 13, 2018 and 6.25% every three months thereafter) ending July 13, 2021.
- This class of restricted share units is included in Column 5 of Table I above.

/s/ Ilan Hadar as attorney-in-fact for Stanley Hirsch 07/13/2018

\*\* 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.