The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete. The reader should not assume that the information is accurate and complete.				
Inereader should not assume that the information is accurate and complete. UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D Notice of Exempt Offering of Securities				
1. Issuer's Identity				
CIK (Filer ID Number)	Previous Names	X None	Entity Type	
0001611842 Name of Issuer PolyPid Ltd. Jurisdiction of Incorporation/Organization ISRAEL Year of Incorporation/Organization			X Corporation Limited Part Limited Liab General Part Business Tr Other (Spec	inership vility Company rtnership ust
Within Last Five Years (Specify Years) Yet to Be Formed	ear)			
2. Principal Place of Business and (Contact Information			
Name of IssuerPolyPid Ltd.Street Address 118 HASIVIM STREETCityStatePETACH TIKVAISRA	e/Province/Country	Street Address 2 ZIP/PostalCode 495376	Phone Numbe +972-74-719-57	
3. Related Persons				
Last Name Czaczkes Akselbrad Street Address 1 18 Hasivim Street City Petach Tikva Relationship: X Executive Officer X Clarification of Response (if Necessar		ountry	Middle Name ZIP/PostalCode 495376	
Last Name Hazan Street Address 1 18 Hasivim Street	First Name Dalit Street Address 2		Middle Name	
City Petach Tikva Relationship: X Executive Officer	State/Province/Co ISRAEL Director Promoter	ountry	ZIP/PostalCode 495376	
Clarification of Response (if Necessar	y):			
Last Name Warshavsky Street Address 1 18 Hasivim Street City	First Name Ori Street Address 2 State/Province/Co	ountry	Middle Name ZIP/PostalCode	
Petach Tikva Relationship: X Executive Officer	ISRAEL Director Promoter		495376	

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Missulawin	Jonny	
Street Address 1 18 Hasivim Street	Street Address 2	
City	State/Province/Country	ZIP/PostalCode
Petach Tikva	ISRAEL	495376
Relationship: X Executive Officer Dire	ctor Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Harel	Jacob	
Street Address 1 18 Hasivim Street	Street Address 2	
City	State/Province/Country	ZIP/PostalCode
Petach Tikva	ISRAEL	495376
Relationship: Executive Officer X Dire	ctor Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Barenholz	Yechezkel	
Street Address 1 18 Hasivim Street	Street Address 2	
City	State/Province/Country	ZIP/PostalCode
Petach Tikva	ISRAEL	495376
Relationship: Executive Officer X Dire	ctor Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Dror Street Address 1	Nir Street Address 2	
18 Hasivim Street	Street Address 2	
City	State/Province/Country	ZIP/PostalCode
Petach Tikva	ISRAEL	495376
Relationship: Executive Officer X Dire	ctor Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
BenAmram	Yossi Street Addrees 2	
Street Address 1 18 Hasivim Street	Street Address 2	
City	State/Province/Country	ZIP/PostalCode
Petach Tikva	ISRAEL	495376
Relationship: Executive Officer X Dire	ctor Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Krinsky Street Address 1	Itzhak Street Address 2	
18 Hasivim Street		
City	State/Province/Country	ZIP/PostalCode
Petach Tikva	ISRAEL	495376
Relationship: Executive Officer X Dire	ctor Promoter	
Clarification of Response (if Necessary):		

Stein	Robert B.		
Street Address 1	Street Address 2		
18 Hasivim Street			
City	State/Province/Country	ZIP/PostalCode	
Petach Tikva	ISRAEL	495376	
Relationship: Executive Officer X Dire	ector Promoter		
Clarification of Response (if Necessary):			
Last Name	First Name	Middle Name	
Tweezer-Zaks	Nurit		
Street Address 1	Street Address 2		
18 Hasivim Street			
City	State/Province/Country	ZIP/PostalCode	
Petach Tikva	ISRAEL	495376	
Relationship: Executive Officer X Dire			
Clarification of Response (if Necessary):			
4. Industry Group			
Agriculture	Health Care	Retailing	
Banking & Financial Services	X Biotechnology	Restaurants	
Commercial Banking	Health Insurance		
Insurance		Technology	
Investing	Hospitals & Physicians	Computers	
Investment Banking	Pharmaceuticals	Telecommunications	
Pooled Investment Fund	Other Health Care	Other Technology	
Is the issuer registered as	Manufacturing	Travel	
an investment company under	Real Estate		
the Investment Company Act of 1940?		Airlines & Airports	
		Lodging & Conventions	
	Construction	Tourism & Travel Services	
Other Banking & Financial Service	s REITS & Finance	Other Travel	
Business Services	Residential		
Energy		Other	
Coal Mining	Other Real Estate		
Energy Conservation			
Environmental Services			
Oil & Gas			
5. Issuer Size			
Revenue Range OR	Aggregate Net Asset Va	alue Range	
X No Revenues	No Aggregate Net A	sset Value	
1 \$1 - \$1,000,000	\$1 - \$5,000,000		
\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,00	0,000	
\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,0	00,000	
\$25,000,001 - \$100,000,000	\$50,000,001 - \$100,	000,000	
Over \$100,000,000	Over \$100,000,000		
Decline to Disclose			
Not Applicable	Not Applicable		

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Investment Company Act Section 3(c)

	ction 3(c)(1) Section 3(c)(9)	
	ction 3(c)(2) Section 3(c)(10)	
Rule 504 (b)(1)(iii)	ction 3(c)(3)	
	action 3(c)(4) Section 3(c)(12)	
	ction 3(c)(5)	
Sec	ction 3(c)(6) Section 3(c)(14)	
	ction 3(c)(7)	
7. Type of Filing		
	Yet to Occur	
Amendment		
8. Duration of Offering		
Does the Issuer intend this offering to last more than one yea	ar? Yes X No	
9. Type(s) of Securities Offered (select all that apply)		
X Equity	Pooled Investment Fund Interests	
Debt	Tenant-in-Common Securities	
X Option, Warrant or Other Right to Acquire Another Securit		
X Security to be Acquired Upon Exercise of Option, Warrant Right to Acquire Security	t or Other (describe)	
10. Business Combination Transaction		
Is this offering being made in connection with a business com merger, acquisition or exchange offer?	nbination transaction, such as a	
Clarification of Response (if Necessary):		
11. Minimum Investment		
Minimum investment accepted from any outside investor 0 l	USD	
12. Sales Compensation		
Recipient	Recipient CRD Number None	
CITIZENS JMP SECURITIES, LLC	22208	
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number X None	
· · · · · · · · · · · · · · · · · · ·	(
None	None	
None Street Address 1		
None Street Address 1 450 PARK AVENUE	None Street Address 2	7IP/Postal Code
None Street Address 1	None Street Address 2 State/Province/Country	ZIP/Postal Code
None Street Address 1 450 PARK AVENUE City	None Street Address 2 State/Province/Country	
None Street Address 1 450 PARK AVENUE City NEW YORK State(s) of Solicitation (select all that apply) Check "All States" or check individual States	None Street Address 2 State/Province/Country NEW YORK	
None Street Address 1 450 PARK AVENUE City NEW YORK State(s) of Solicitation (select all that apply)	None Street Address 2 State/Province/Country NEW YORK	
None Street Address 1 450 PARK AVENUE City NEW YORK State(s) of Solicitation (select all that apply) Check "All States" or check individual States All States	None Street Address 2 State/Province/Country NEW YORK	
None Street Address 1 450 PARK AVENUE City NEW YORK State(s) of Solicitation (select all that apply) Check "All States" or check individual States All States	None Street Address 2 State/Province/Country NEW YORK	
None Street Address 1 450 PARK AVENUE City NEW YORK State(s) of Solicitation (select all that apply) Check "All States" or check individual States All States CALIFORNIA MARYLAND NEW YORK TEXAS	None Street Address 2 State/Province/Country NEW YORK	
None Street Address 1 450 PARK AVENUE City NEW YORK State(s) of Solicitation (select all that apply) Check "All States" or check individual States All States CALIFORNIA MARYLAND NEW YORK	None Street Address 2 State/Province/Country NEW YORK	
None Street Address 1 450 PARK AVENUE City NEW YORK State(s) of Solicitation (select all that apply) Check "All States" or check individual States All States CALIFORNIA MARYLAND NEW YORK TEXAS	None Street Address 2 State/Province/Country NEW YORK Foreign/non-US	
None Street Address 1 450 PARK AVENUE City NEW YORK State(s) of Solicitation (select all that apply) Check "All States" or check individual States CALIFORNIA MARYLAND NEW YORK TEXAS 13. Offering and Sales Amounts	None Street Address 2 State/Province/Country NEW YORK Foreign/non-US	
None Street Address 1 450 PARK AVENUE City NEW YORK State(s) of Solicitation (select all that apply) Check "All States" or check individual States CALIFORNIA MARYLAND NEW YORK TEXAS 13. Offering and Sales Amounts Total Offering Amount \$35,010,120 USD or	None Street Address 2 State/Province/Country NEW YORK Foreign/non-US	
None Street Address 1 450 PARK AVENUE City NEW YORK State(s) of Solicitation (select all that apply) Check "All States" or check individual States CALIFORNIA MARYLAND NEW YORK TEXAS 13. Offering and Sales Amounts Total Offering Amount \$35,010,120 USD or Indefinite Total Amount Sold	None Street Address 2 State/Province/Country NEW YORK Foreign/non-US	

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering.

Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions \$1,	054,039 USD	Estimate
Finders' Fees	\$ <mark>0</mark> USD	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State
 in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of
 process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that
 such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought
 against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any
 activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the
 provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment
 Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the
 State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
PolyPid Ltd.	/s/ Dikla Czaczkes Akselbrad	Dikla Czaczkes Akselbrad	Chief Executive Officer	2024-01-21

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D. States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.

20