FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Donegan Michael C						2. Issuer Name and Ticker or Trading Symbol TherapeuticsMD, Inc. [TXMD]							ck all applica Director	tionship of Reporting all applicable) Director		10% Owner	
(Last) 951 YAN	`	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/10/2021						x	Officer (give title below) CAO and VP Finance			респу		
(Street) BOCA R (City)	ATON F	L State)	33431 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Inc Line)	Form file	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
	`	T	able I - Nor	n-Deriva	tive S	ecui	rities Aca	uired.	Dis	posed of.	or Ben	eficially	Owned				
1. Title of Security (Instr. 3)		2. Transact	2. Transaction Date		2A. Deemed Execution Date,		3. 4. Securiti		es Acquired (A) or Of (D) (Instr. 3, 4 and 5		5. Amount of Securities Beneficially Owned Following		Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
								v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock		05/10/2021 M 19,000 A (1) 19,000				000	D									
Common	Stock			05/11/2	021			S ⁽²⁾		4,842	D	\$1.04(3)	\$1.04 ⁽³⁾ 14,158 D				
			Table II -				ties Acqu varrants,						wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	Code	, Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exerc tion Da //Day/\			ies g Security	8. Price of Derivative Security (Instr. 5)	derivativ Securiti Benefici Owned Followir Reporte	ve es ally ng d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares		Transact (Instr. 4)	ן (פוווט)		
Restricted Stock Units	\$0	05/10/2021		М			19,000(1)(4)	(5))	(5)	Common Stock	19,000	\$0	38,000) ⁽⁴⁾	D	

Explanation of Responses:

- 1. On May 10, 2021, the reporting person received 19,000 shares of issuer common stock in settlement of restricted stock units (RSUs), which vested on March 30, 2021.
- 2. The reported securities represent shares of issuer common stock sold upon settlement to satisfy tax obligations.
- 3. The price reported in Column 4 is a weighted average price. The reported securities were sold in multiple transactions with prices ranging from \$1.03 to \$1.06 for an average weighted sale price of \$1.04. The reporting person undertakes to provide the issuer, any security holder of the issuer or the staff of the Securities and Exchange Commission upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.
- 4. Each RSU represents a contingent right to receive one share of issuer common stock upon settlement.
- 5. The RSUs vest in three equal installments annually beginning March 30, 2021, becoming fully vested on March 30, 2023.

05/12/2021 /s/ Michael C. Donegan

** 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.