FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burde	en								
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).

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>Bernick Brian</u>				2. Issuer Name <b>and</b> Ticker or Trading Symbol TherapeuticsMD, Inc. [ TXMD ]							elationship of ck all applica Director	able)	Perso	on(s) to Issu		
			0	3. Date of Earliest Transaction (Month/Day/Year) 03/15/2017  4. If Amendment, Date of Original Filed (Month/Day/Year)						6 In	Officer (below)	give title	Filing /	Other (specification)		
(Street) BOCA R (City)	ATON F	L State)	33487 (Zip)		s. II Allie	enument,	Date	oi Original Pilet	I (MOHIII/Da	yr rear)	Line)	Form fil	ed by One	Repor	ting Person One Report	
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			ransacti e	action 2A. Deemed Execution Date,		Code (Instr.		d (A) or	5. Amoun	Form ly (D) o	Form:	n: Direct   I or Indirect   I ostr. 4)   (	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code V	Amount	(A) or (D)	(A) or (D) Price		ion(s) and 4)					
	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)	Conversion Date Exercise (Month/Day/Year) if a		3A. Deemed Execution Date, if any (Month/Day/Year)		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)		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		(Instr. 4)	on(s)		
Non- qualified stock option (right to buy)	\$6.83	03/15/2017		A		170,000		03/15/2018 <sup>(1)</sup>	03/14/2027	Common Stock	170,000	\$0	170,00	0	D	

## **Explanation of Responses:**

1. Underlying shares vest as follows: 56,667 shares on the first anniversary date of the grant, 56,667 shares on the second anniversary date of the grant, and 56,666 shares on the third anniversary date of the grant.

/s/ Brian Bernick

03/17/2017

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.