FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington.	D.C. 20549	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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).

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* Cartwright Daniel A				2. Issuer Name and Ticker or Trading Symbol TherapeuticsMD, Inc. [TXMD]							k all applicab Director Officer (g	le)	10% Owner ve title Other (specify		ner		
(Last) (First) (Middle) 951 YAMATO ROAD SUITE 220				3. Date of Earliest Transaction (Month/Day/Year) 03/30/2020							Chief Financial Officer						
(Street) BOCA RA			33431 (Zip)	4	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Ind	dividual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date		2. Transac Date (Month/Da	Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 1)		d (A) or r. 3, 4 and 5)	5. Amount Securities Beneficially Following Reported		Form:	Direct Indirect Etr. 4)	7. Nature of ndirect Beneficial Ownership Instr. 4)					
						Code	v	Amount	(A) or (D)	Price	Transaction (Instr. 3 and				1150. 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Code (Inst				6. Date Exercisable and Expiration Date (Month/Day/Year)					8. Price of Derivative Security (Instr. 5)		ve es ially ng d	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)	(0)		
Performance Stock Units	\$0	03/30/2020		A		151,500 ⁽¹⁾		(1)		(1)	Common Stock	151,500(1)	\$0	151,50	0(1)	D	
Restricted Stock Units	\$0	03/30/2020		A		151,500		(2)		(2)	Common Stock	151,500	\$0	151,5	00	D	

Explanation of Responses:

1. The performance stock units (PSUs) vest upon the issuer achieving break-even of quarterly earnings before interest, taxes, depreciation and amortization (EBITDA) for a fiscal quarter no later than the quarter ending December 31, 2022, otherwise the PSUs will be forfeited. The number of PSUs listed is the base number of PSUs that may vest. The actual number of PSUs that will vest will be between zero and two times the base number of PSUs depending on when the issuer achieves break-even of quarterly EBITDA. In accordance with the terms of the issuer's 2019 Stock Incentive Plan, no PSUs will vest prior to the one-year anniversary of the grant date. Each PSU represents a contingent right to receive one share of common stock of the issuer.

2. Each restricted stock unit (RSU) represents a contingent right to receive one share of common stock of the issuer. The RSUs will vest in three equal installments annually beginning March 30, 2021, becoming fully vested on March 30, 2023.

/s/ Daniel A. Cartwright

04/01/2020

** 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.