Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to | STATEMENT OF CHANGES IN BENEFICIAL | OWNERSHIP |
|--|------------------------------------|------------------|
| Section 16. Form 4 or Form 5 | | |
| obligations may continue. See | | |

OMB APPROVAL OMB Number: 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

| 1. Name and Address of Reporting Person* SEGAL NICHOLAS (Last) (First) (Middle) 6800 BROKEN SOUND PKWY NW, THIRD FLOOR (Street) BOCA RATON FL 33487 (City) (State) (Zip) | | | | 3. 00 | Issuer Name and Ticker or Trading Symbol TherapeuticsMD, Inc. [TXMD] One of Earliest Transaction (Month/Day/Year) 06/21/2017 If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. In | eck all applic X Director Officer below) Individual or Section X Form f | or 10% Owner (give title Other (specification) Joint/Group Filing (Check Application) Giled by One Reporting Person (filed by More than One Reporting) | | pecify Dicable | |
|---|---|--|--|----------------------------------|--|---|----------------------------------|---------------------|-------------------------|--|-----------------|---|---|--|--------------------------|--|--|
| Date (Month/Da | | | | Transactio ate lonth/Day/\ | 2A. Deemed Execution Date, | | 3. Transact Code (In 8) | tion str. | 4. Securion Disposed 5) | urities Acquired (A) led Of (D) (Instr. 3, 4 let (A) or (D) Pr | | 5. Amou Securitie Beneficia Owned Reported Transact (Instr. 3 a | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | Direct Indirect Istr. 4) | 7. Nature of Indirect Beneficial Dwnership Instr. 4) | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | | g., puts 4. Trans Code | | alls, warrants, 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | , options, converti | | onvertil | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | , | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Non- Qualified Stock Option (right to buy) | \$5.8 | 06/21/2017 | | A | v | 50,000 | (D) | 06/21/2018 | D | 6/21/2027 | Common Stock | 50,000 | \$0 | 50,000 | | D | |

Explanation of Responses:

/s/ Nicholas Segal

06/23/2017

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).