FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

11asimigton, 210. 200 to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours ner resnonse.	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* MUSING JULES A.					2. Issuer Name and Ticker or Trading Symbol TherapeuticsMD, Inc. [TXMD]								Relationship eck all appli X Direct	cable) or	g Pers	10% Ow	ner	
					07/	3. Date of Earliest Transaction (Month/Day/Year) 07/02/2018								below)		Filing	Other (s below)	
(Street) BOCA R	RATON FL 33487					4. If Amendment, Date of Original Filed (Month/Day/Year)								dividual or Joint/Group Filing (Check Applicable) K Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(<u> </u>	(Zip)			- 0-						D	6: . : . 1		•			
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				saction	ction 2A. Deemed Execution Date,			3. 4. Securit Transaction Code (Instr. 8) 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amou Securitie Benefici Owned I Reporte	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership Instr. 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. Conversior or Exercise Price of Derivative Security		3A. Deemed Execution I if any (Month/Day	Date, T	4. Transactior Code (Instr. 8)				6. Date Exer Expiration D (Month/Day/	ate		7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		kpiration ate	Title	Amount or Number of Shares					
Non- Qualified Stock Option (right to buy)	\$6.35	07/02/2018			A		50,000		07/02/2019	07	7/02/2028	Common Stock	50,000	\$0	50,00	0	D	

Explanation of Responses:

/s/ Jules A. Musing

07/05/2018

** 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).