FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Milligan John C.K. IV						2. Issuer Name and Ticker or Trading Symbol TherapeuticsMD, Inc. [TXMD]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
wiiiigaii Joilii C.K. IV						-				_	_			X Directo				Owner	
(Last) (First) (Middle) 6800 BROKEN SOUND PARKWAY NW., THIRD FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 05/12/2014								X Officer (give title Other (specify below) President/Secretary					
(Street) BOCA RATON FL 33487					4.	If Amer	ndme	nt, Date	of Origii	nal Fil	dividual or Joint/Group Filing (Check Applicable) K Form filed by One Reporting Person Form filed by More than One Reporting				rson				
(City)	(State) (Zip)					Person													
		Tal	ole I - N	lon-Deri	ivativ	e Sec	curit	ies Ac	quire	d, D	isposed o	f, or Be	neficial	ly Owned					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					Exed if an	. Deemed ecution Date, ny onth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Beneficially Owned Following		6. Ownershi Form: Direc (D) or Indire g (I) (Instr. 4)		Indirect ct Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Ins		(Instr. 4)		
Common Stock 05/12/20					2014	14			M		20,000	A	\$0.1018	1,742,419		D			
Common Stock														3,892,187		I I C		By John C.K. Milligan Revocable Trust U/A 08/10/2009, as amended 11/22/2011	
			Table I								posed of, convertil			Owned					
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/Year)		4. Transa Code (8)		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5) Benefi Owned Follow Report		ties Form: cially Direct or Indi ring (I) (Insi		Beneficial Ownership ect (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						
Non- Qualified Stock Option (right to	\$0.1018	05/12/2014			M	20,000 (1) 01/01/2019 Common Stock 20,000		20,000	\$0	2,032,255		D							

Explanation of Responses:

1. All shares underlying this option vested on or before Janury 1, 2012.

/s/ John C.K. Milligan, IV

05/13/2014

** 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).