Instruction 1(b)

## FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	$D \subset$	205/10
Washington,	D.C.	20549

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OMB APP	ROVAL
OMD Number	2225.0

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## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

Form 3	Holdings Repo	rted.																
Form 4	Transactions F	Reported.	Fil	led pursuant to or Section								1934						
Name and Address of Reporting Person*     Bernick Brian					2. Issuer Name <b>and</b> Ticker or Trading Symbol TherapeuticsMD, Inc. [ TXMD ]						5. Relationship of Reporting Person(s) to Issue (Check all applicable)  X Director 10% Owner				/ner			
(Last) (First) (Middle) 6800 BROKEN SOUND PARKWAY NW,					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2014					ar)	Officer (give title Other (specify below)					pecify		
THIRD F	LOOK			4. If Amend	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) BOCA RATON FL 33487				_							X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City) (State) (Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
''' ''' '		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispose Of (D) (Instr. 3, 4 and 5)				isposed	Securities Beneficially		6. Ownership Form: Direct		7. Nature of Indirect Beneficial Ownership		
				(монильау/те	ai)	8)		Amount		(A) or (D)	Pric	e	Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		(Instr. 4)	
Common Stock		12/10/2014		G			250,	000	D		\$0	6,495,999(1)		]	r	By BF Investment Enterprises, Inc.		
Common Stock											297,000		D					
Common Stock												3,000(2)		I		By BF Management, LLC		
		Ta	able II - Deriva (e.g., p	tive Securi outs, calls,									y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	rcise (Month/Day/Year) if any Code (Instr. 8) Derivative Securities Acquired		ivative curities juired or posed D) tr. 3, 4	Exp	i. Date Exercisable and Expiration Date Month/Day/Year)  7. Title a Amount Securitie Underlyi Derivatii Security and 4)			of es ng /e	Derivative Security (Instr. 5) Be Ow Fol Re Transition (Instr. 5) Re Tr		ecurities Form eneficially Direct wned or Inc						
		1	1	I		I			- 1	- 1	AIIIUUIII		1		I	- 1		

## **Explanation of Responses:**

1. The reported securities are owned by BF Investment Enterprises, Ltd. ("BF Investment"). The reporting person (i) holds, together with his spouse as tenants by the entirety, a 70.6% membership interest in BF Management, LLC (the "GP"), the general partner of BF Investment, (ii) holds, together with his spouse as tenants by the entirety, a 73% limited partner interest in BF Investment, (iii) holds in the aggregate, with his spouse in their individual capacities, 3.272% limited partner interest in BF Investment, and (iv) serves as the Manager of the GP. The reporting person disclaims beneficial ownership of TherapeuticsMD, Inc. (the "Company") common stock except to the extent of his pecuniary interest therein.

Date

Exercisable

(A)

(D)

Expiration

Date

Title

2. The reported securities are held by the GP. As disclosed in footnote 1 above, the reporting person, together with his spouse as tenants by the entirety, holds a 70.6% membership interest in the GP. The reporting person disclaims beneficial ownership of the Company common stock held by the GP, except to the extent of his pecuniary interest therein.

/s/ Brian Bernick 02/17/2015

\*\* Signature of Reporting Person

Number

of Shares

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.