FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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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

						01 3	Section	1 30(11)	or tire	IIIVESIII	ient C	onipany Act	01 1340							
1. Name and Address of Reporting Person* <u>Collins Cooper C.</u>						2. Issuer Name and Ticker or Trading Symbol TherapeuticsMD, Inc. [ TXMD ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					1									X	Direc	ctor	10	0% Own	ner	
(Last) (First) (Middle) 6800 BROKEN SOUND PARKWAY NW,							3. Date of Earliest Transaction (Month/Day/Year) 03/10/2016									Office	er (give title w)		ther (sp elow)	ecify
THIRD FLOOR					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)															Line)  X Form filed by One Reporting Person					
BOCA RATON, FL 33487														Form filed by More than One Reporting Person						
(City)		(Sta	te) (	Zip)			1 0.000													
			Tabl	e I - N	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or E	Benefic	ially	Owne	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/N					Executio Year) if any		ution Date,				s Acquired (A) or of (D) (Instr. 3, 4 a		nd 5) Secu Bene Own		icially d Following	6. Ownersh Form: Dire (D) or Indir (I) (Instr. 4)	ct of ect Be O	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			("	11501. 4)	
Common Stock 03/11/20					016	016					16,000	A	\$6.23	323(1)		86,000	D			
			Та	ble II								osed of, convertib				vned				
1. Title of Derivative Security (Instr. 3)  2. Convex or Exemple of Exemple 2. Convex or Exem		ion ise	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)		Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exerc ition Da h/Day/\		7. Title Amoun Securit Underly Derivat Securit and 4)	it of ties ying	Deri Secu (Inst	ivative urity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	ship of Bo D) O ect (Ir	Beneficial Ownership (Instr. 4)
					•	Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						

## **Explanation of Responses:**

1. These shares were purchased in multiple transactions at prices ranging from \$6.18 to \$6.29, inclusive; the price reported reflects the weighted average price. The reporting person undertakes to provide to TherapeuticsMD, Inc. (the "Company"), any security holder of the Company, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.

/s/ Cooper C. Collins

03/14/2016

\*\* 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.