FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-028								
Estimated average b	urden								

0.5

hours per response:

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 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Se	ection 30(n) of th	e investr	ient C	on	npany Act c	OT I	1940							
1. Name and Address of Reporting Person* <u>Collins Cooper C.</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol TherapeuticsMD, Inc. [TXMD]								Check	tionship of Reporting Person(s) to Issuer all applicable)					
Comms	Cooper	<u></u>				_								X	Direc	ctor		10% C	wner
	OKEN SO	rst) (	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/13/2019										Officer (give title below)		e Other below		specify
3RD FLOOR			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6	6. Individual or Joint/Group Filing (Check Applicable							
(Street) BOCA R	ATON, FI	L 3	33487											ine) X		n filed by One n filed by Mor on		•	
(City)	(S	tate) (	Zip)																
		Tabl	e I - No	n-Deriv	ative S	Securities A	cquire	d, Di	S	posed of	f, d	or Ber	nefici	ally (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)				2A. Deemed Execution Date if any (Month/Day/Yea	Code	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			d 5)	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
						Code	v		Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock			05/13/	2019		P			30,000		A	\$3.329(1)		66,000		Γ	)		
		Та	ıble II -			curities Acc lls, warrant									vned				
Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any		4. Transact Code (In: 8)		Expira (Mont	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		;	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owr Forr Dire or Ir (I) (I	nership n: ct (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

## **Explanation of Responses:**

1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$3.32 to \$3.33, inclusive. The Reporting Person undertakes to provide 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.

(D)

Date Exercisable Expiration

Title

Date

/s/ Cooper C. Collins

05/15/2019

\*\* Signature of Reporting Person

Amount or Number

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.