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Therapeutics Form 4 March 26, 20										
FORN Check th if no long subject to Section 1 Form 4 o Form 5	s box ger 6. r	UNITED STATES SECURITIES AND EXCHANGE COMMISSI Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP SECURITIES						N OMB Number: Expires: Estimated burden hou response.	urs per	
obligation may cont <i>See</i> Instru 1(b).	ns Section 17(Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								
(Print or Type I	Responses)									
1. Name and Address of Reporting Person <u>*</u> MUSING JULES A.			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
(Least)	Middle	•	euticsMD	_	XMDJ	(Check all applicable)				
(Last) (First) (Middle) 6800 BROKEN SOUND PARKWAY NW,, THIRD FLOOR				of Earliest T Day/Year) 2015	ransaction		X_Director10% Owner Officer (give titleOther (specify below) below)			
Filed(I				endment, Da onth/Day/Yea	-	ıl	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
	ON, FL 33487						Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securities	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Rep	ort on a separate line	e for each cla	ass of sec	urities benet	Perso	ons who re nation cor	or indirectly. espond to the collentained in this form	n are not	SEC 1474 (9-02)	

Persons who respond to the collection of SEC 14. information contained in this form are not (9-0 required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amo
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Secu
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security	rivative		(Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			f (D)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Ar Nu Sh	
Non-qualified stock option	\$ 5.92	03/25/2015		А		100,000		12/31/2015	03/24/2025	Common Stock	10	

Reporting Owners

Reporting Owner	Relationships					
	Director	10% Owner	Officer	Other		
MUSING JULES A. 6800 BROKEN SOUN THIRD FLOOR BOCA RATON, FL 33	Х					
Signatures						
/s/ Jules A. Musing	03/26/2015					
**Signature of	Date					

Reporting Person Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.