Edgar Filing: OptimizeRx Corp - Form 4

OptimizeRx	Corp												
Form 4													
May 15, 201	7												
FORM	1 4									OMB AF	PPROVAL		
					RITIES AND EXCHANGE COMMISS Shington, D.C. 20549					OMB Number:	3235-0287		
Check thi										Expires:	January 31,		
if no long subject to		EMENT O	F CHAN	GES IN	N B	BENEFI	CIAI	L OWI	NERSHIP OF	Estimated a	2005		
Section 1		SECURITIES											
Form 4 of	r									burden hours per response 0.8			
Form 5	Filed p	oursuant to	Section 1	6(a) of t	the	Securiti	es Ex	change	e Act of 1934,				
obligation		7(a) of the	Public Ut	tility Ho	oldi	ing Com	pany	Act of	1935 or Section	ı			
may cont <i>See</i> Instru 1(b).		30(h)) of the In	vestmer	nt (Company	Act	of 194	0				
(Print or Type F	Responses)												
1. Name and A BAKER DC	ddress of Reportin	ng Person <u>*</u>	2. Issuer Symbol	Name a	nd '	Ticker or T	Frading	g	5. Relationship of Issuer	Reporting Pers	son(s) to		
Optimi				eRx Co	orp	[OPRX]			(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	Farliest '	- Tra	nsaction			(Checl	k all applicable	e)		
			(Month/D			insuction			Director	10%	Owner		
400 WATE	R STREET, SU	JITE 200	05/11/2	-					X_Officer (give below)		er (specify		
	(Street)		4. If Ame	ndment. I	Date	e Original			6. Individual or Jo	int/Group Filir	g(Check		
			Filed(Mor			8			Applicable Line)	rr	8(
					,				_X_ Form filed by C				
ROCHESTE	ER, MI 48307								Form filed by M Person	lore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non	-De	erivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction D			3.		4. Securiti			5. Amount of	6. Ownership			
Security	(Month/Day/Ye		on Date, if			n(A) or Dis	•			Form: Direct			
(Instr. 3)		any (Month/	Day/Year)	Code (Instr. 8		(Instr. 3, 4	and 5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(INIOIIUI)	Day/ I cal)	(msu. o	,,				Following	(Instr. 4)	(Instr. 4)		
							(•)		Reported				
							(A) or		Transaction(s)				
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	05/11/2015							\$	50.000	D			
Stock	05/11/2017			Р		10,000	А	0.77	50,000	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

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

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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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BAKER DOUGLAS P 400 WATER STREET, SUITE 200 ROCHESTER, MI 48307			CHIEF FINANCIAL OFFICER				
Signatures							

'Y'

/s/ Doug Baker	05/15/2016
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**Signature of Reporting Person

Date

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.