FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL

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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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Krogulski Kenneth					CUMBERLAND PHARMACEUTICALS INC CPIX										k all app Dired	olicable) ctor	g Person(s) to Is)wner
(Last) (First) (Middle) 2525 WEST END AVENUE SUITE 950				3. Date of Earliest Transaction (Month/Day/Year) 09/20/2019								-	Officer (give title below)		below)	(specify		
(Street) NASHVI	LLE TN	1	37203		4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(St	ate)	(Zip)												Pers	on		
		Tab	le I - Non-	Derivat	ive S	Sec	uritie	s Acq	uired,	Dis	posed o	f, or B	enef	icially	Own	ed		
1. Title of Security (Instr. 3)		[2. Transaction Date (Month/Day/Year)		E) if:	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)) or 4 and	Securi Benefi Owned	Amount of curities neficially ned Following ported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or F	rice	Transa	action(s) 3 and 4)		(
Common	Stock			09/20/2	019				P		65(1)	A	1	\$5.33	10	61,422	D	
Common	Stock			09/23/2	019				P		65(1)	A	1	\$5.35	10	64,287	D	
Common	Stock			09/24/2	019				P		65(1)	A	1	\$5.39	10	64,352	D	
Common	Stock			09/25/2	019				P		65(1)	A	1	\$5.38	10	64,417	D	
Common	Stock			09/26/2	019				P		65(1)	A	1	\$5.76	10	64,482	D	
Common	Stock			09/27/2	019				P		65(1)	A	1	\$5.76	10	64,547	D	
Common	Stock			09/30/2	019				P		65(1)	A	1	\$5.89	10	64,612	D	
Common	Stock			10/01/2	019				P		65(1)	A	1	\$5.89	10	64,677	D	
Common	Stock			10/02/2	019				P		65(1)	A	1	\$5.77	10	64,742	D	
Common	Stock			10/04/2	019				P		65(1)	A	1	\$5.76	10	64,807	D	
Common	Stock			10/07/2	019				P		65(1)	A	1	\$5.74	10	64,872	D	
Common	Stock			10/08/2	019				P		65(1)	A	1	\$5.81	10	64,937	D	
Common	Stock			10/09/2	019				P		65(1)	A	1	\$5.78	10	55,002	D	
Common	Stock			10/10/2	019				P		65(1)	A	1	\$5.86	10	65,067	D	
Common	Stock			10/11/2	019				P		65(1)	A	1	\$5.71	10	55,132	D	
Common	Stock			10/14/2	019				P		65(1)	A	1	\$5.67	10	65,197	D	
Common	Stock			10/15/2	019				P		65(1)	A	1	\$5.63	10	65,262	D	
Common	Stock			10/16/2	019				P		65(1)	A	1	\$5.56	10	65,327	D	
Common	Stock			10/17/2	019				P		65(1)	A	1	\$5.52	10	55,392	D	
Common	Stock			10/18/2	019				P		65(1)	A	1	\$5.45	10	65,457	D	
Common	Stock			10/19/2	019				P		38(1)	A	1	\$5.51	10	65,495	D	
		Ta	able II - De (e.								sed of, o				wned			
Derivative Conversion Date Execu Security or Exercise (Month/Day/Year) if any		3A. Deemed Execution D	ed 4. Transaction Code (Ins		ion	on of l		6. Date Expiration	Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4)		8. De Se (In	Price of rivative curity str. 5)	tive derivative ty Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	ode \	,	(A)		Date Exercisal		Expiration Date	Title	Amount or Number of e Shares					

Explanation of Responses:

1. The purchases reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person during March 2019.

Remarks:

Kenneth J. Krogulski by /s/ Michael Bonner as attorney-infact

** 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.