FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20040

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ı	OMB APPRO	IVAL				
	OMB Number:	3235-0287				
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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

Name and Address of Reporting Person* Bonner Michael						2. Issuer Name and Ticker or Trading Symbol CUMBERLAND PHARMACEUTICALS INC [CPIX]									Check all	nship of Repo applicable) pirector officer (give ti	Ü	Person(s) to Is 10% C Other	
(Last) (First) (Middle) 2525 WEST END AVENUE, SUITE 950						3. Date of Earliest Transaction (Month/Day/Year) 08/23/2017										elow)			
(Street) NASHVILLE TN 37203 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Da		n Date,	, Transaction Dispos Code (Instr. 5)		Disposed	rities Acquired (A) ed Of (D) (Instr. 3, 4			nd Se Be Ov	Amount of curities neficially ned Followin ported	Fo (D	Ownership orm: Direct O) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	Amount		(A) or (D)	Price	ͺ Tra	nsaction(s) str. 3 and 4)			(111511.4)			
Common	3/2017	2017			P		500		A \$6.7		72	15,447		D					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security 3. Transaction Date Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4)			8. Price Derivati Security (Instr. 5	ve derivativ Securitie	e s ally g i	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V		v	(A)	(D)	Date Exercisal	Date Expiration Exercisable Date		Title	or Nur of	nber					

Explanation of Responses:

Remarks:

Michael Bonner

** Signature of Reporting Person Date

08/25/2017

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.