FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## Washington, D.O. 20040

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

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

1. Name and Address of Reporting Person* <u>Greer Lawrence W</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol  CUMBERLAND PHARMACEUTICALS  INC [ CPIX ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				
(Last) (First) (Middle) 2525 WEST END AVE. SUITE 950					3. Date of Earliest Transaction (Month/Day/Year) 03/26/2010									belov		Filing	Other (s below)		
(Street)  NASHVILLE TN 37203  (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)									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. Transaction  3. Transaction  4. Securities Acquired (A) or Transaction  5. Amount of Transaction  5. Amount of Transaction  6. Ownership														7. Nature					
Date (Month/Da					ay/Year) Execution if any (Month/Da				Code (In 8)	str. 5)		t (A) or (D)		Benefi Owned Report Transa	icially (D) d Following (I) (		m: Direct or Indirect nstr. 4)	of Indirect Beneficial Ownership (Instr. 4)	
		Т	able II - D (e						uired, Dis s, options					y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date, T	4. Transaction Code (Instr 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercisable		ration	Title	Amount or Number of Shares						
Options	\$11.29	03/26/2010			A		1,000		12/31/2010	03/26	6/2015	Common stock	1,000	\$0.00	1,000		D		

**Explanation of Responses:** 

Remarks:

<u>Lawrence W. Greer: /s/ David</u> <u>L. Lowrance as attorney-in-fact</u>

03/29/2010

\*\* 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.