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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| 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

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

| 1. Name and Addre <u>Greer Lawre</u> (Last) 2525 WEST EN | nce W (First) | g Person [*] (Middle) | 2. Issuer Name and Ticker or Trading Symbol <u>CUMBERLAND PHARMACEUTICALS</u> <u>INC</u> [CPIX] 3. Date of Earliest Transaction (Month/Day/Year) 05/21/2010 | | tionship of Reporting Po all applicable) Director Officer (give title below) | erson(s) to Issuer 10% Owner Other (specify below) |
|---|------------------|-----------------------------------|---|---------|--|---|
| SUITE 950 | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6 Indiv | vidual or Joint/Group Fili | ng (Check Applicable |
| (Street) | | | | Line) | Form filed by One Re | |
| NASHVILLE | TN | 37203 | | | Form filed by More th Person | an One Reporting |
| (City) | (State) | (Zip) | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution Date, | | ction Instr. | 4. Securities A Disposed Of (5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|-----------------|------|-----------------|--|---------------|---------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130.4) |
| Common stock | 05/21/2010 | | М | | 15,400 | A | \$1.625 | 81,672 | D | |
| Common stock | 05/21/2010 | | F | | 3,863(1) | D | \$6.48 | 77,809 | 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 (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deri Sec Acq (A) (Disp of (I | oosed D) tr. 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--|-------------------------|--|--------------------|--|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Options | \$1.625 | 05/21/2010 | | М | | | 8,000 | 01/04/2002 | 01/04/2012 | Common stock | 8,000 | \$0.00 | 0 | D | |
| Options | \$1.625 | 05/21/2010 | | М | | | 7,400 | 05/19/2002 | 05/19/2012 | Common stock | 7,400 | \$0.00 | 0 | D | |

Explanation of Responses:

1. Shares acquired upon exercise tendered to settle exercise price of option exercise.

Remarks:

Larry Greer: /s/ David L. Lowrance as attorney-in-fact

05/24/2010

Date

** Signature of Reporting Person

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.