

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>Jones James</u> _____ (Last) (First) (Middle) 1600 WEST END AVENUE, SUITE 1300 _____ (Street) NASHVILLE TN 37203 _____ (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>CUMBERLAND PHARMACEUTICALS INC [CPIX]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 08/16/2023	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person Form filed by More than One Reporting Person
Rule 10b5-1(c) Transaction Indication <input checked="" type="checkbox"/> Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.		

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Common Stock	08/16/2023		L	V	65 ⁽¹⁾	A	\$1.64	27,358	D	
Common Stock	08/17/2023		L	V	65 ⁽¹⁾	A	\$1.7	27,423	D	
Common Stock	08/18/2023		L	V	65 ⁽¹⁾	A	\$1.7	27,488	D	
Common Stock	08/21/2023		L	V	65 ⁽¹⁾	A	\$1.68	27,553	D	
Common Stock	08/22/2023		L	V	65 ⁽¹⁾	A	\$1.72	27,618	D	
Common Stock	08/23/2023		L	V	65 ⁽¹⁾	A	\$1.7	27,683	D	
Common Stock	08/24/2023		L	V	27 ⁽¹⁾	A	\$1.69	27,710	D	
Common Stock	08/25/2023		L	V	65 ⁽¹⁾	A	\$1.7	27,775	D	
Common Stock	08/28/2023		L	V	65 ⁽¹⁾	A	\$1.71	27,840	D	
Common Stock	08/29/2023		L	V	70 ⁽¹⁾	A	\$1.67	27,910	D	
Common Stock	08/30/2023		L	V	65 ⁽¹⁾	A	\$1.68	27,975	D	
Common Stock	08/31/2023		L	V	65 ⁽¹⁾	A	\$1.67	28,040	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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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)					

Explanation of Responses:

1. The reported purchases occurred automatically pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on May16, 2023.

Remarks:

James Jones by /s/ John Hamm as attorney-in-fact 09/08/2023
 ** 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.