FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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Name and Address of Reporting Person* Young Caroline						2. Issuer Name and Ticker or Trading Symbol CUMBERLAND PHARMACEUTICALS INC [CPIX]							heck a	onship of all applical Director Officer (g	ble)	ting Person(s) to Issuer 10% Owner Other (specify		
(Last) (First) (Middle) 1600 WEST END AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 12/02/2024								below)		below)		
SUITE 1300					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) NASHVILLE TN 37203													ne)		•	e Reporting Person re than One Reporting		
(City) (State) (Zip)													1 613011					
		Tal	ole I - No	n-Deriva	tive S	ecur	ities Acq	uired,	Dis	posed of	, or Be	nefici	ally (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 (ADisposed Of (D) (Instr. 35)			ind S	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	. т	ransactio Instr. 3 an			(instr. 4)	
Common	Stock			12/02/2	2024			P	V	15(1)	A	\$1	33	29,67	79	D		
Common	Stock			12/03/2	2024			P	V	15(1)	A	\$1.	26	29,69	94	D		
Common Stock				12/04/2024				P	V	15(1)	A	\$1.	22	29,70)9	D		
Common Stock				12/05/2024				P	V	15(1)	A	\$1	.2	29,72	24	D		
Common Stock				12/06/2024				P	V	15(1)	A	\$1	.2	29,73	39	D		
Common Stock			12/09/2024				P	V	15(1)	A	\$1.	25	29,75	54	D			
Common Stock				12/10/2024				P	V	7 (1)	A	\$2.4	48	29,76	51	D		
Common Stock				12/11/2024				P	V	7 (1)	A	\$2.	29	29,76	58	D		
Common Stock				12/12/2024				P	V	7 (1)	A	\$2.	2.19 29,775		75	D		
Common Stock				12/13/2024				P	V	7 ⁽¹⁾	A	\$2	33	29,78	32	D		
Common Stock				12/16/2024				P	V	10(1)	A	\$2.	21	29,79	92	D		
Common Stock				12/17/2024				P	V	10(1)	A	\$2.	12	29,80)2	D		
Common Stock 12/1				12/18/2	2/18/2024				V	10(1)	A	\$2.	19	29,81	12	D		
Common Stock 12/19/				2024				V	4(1)	A	\$2	33	29,81	16	D			
Common Stock 12/20/2				2024			P	V	2(1)	A	\$2	35	29,81	18	D			
		,					ies Acqui varrants,							wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Executi ar) if any	3A. Deemed Execution Date,		ction Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exerci Expiration Da (Month/Day/Y		isable and te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Pri	tr. 5) Beneficia Owned Followin Reported	rivative curities neficially vned llowing ported ansactior	Ownerships Solution S	Beneficial Ownershi t (Instr. 4)	
					Code	v	(A) (D)	Date Exercis	able	Expiration Date	N Of	umber						

Explanation of Responses:

Remarks:

^{1.} The reported purchases occurred automatically pursuant to a Rulo10b5-1 trading plan adopted by the reporting person on March 13, 2024.

** 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.