

AGILE THERAPEUTICS INC

Reported by COIANTE SCOTT M

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 01/27/17 for the Period Ending 01/25/17

Address 101 POOR FARM ROAD

PRINCETON, NJ 08540-1715

Telephone 609-683-1880

CIK 0001261249

Symbol AGRX

SIC Code 2834 - Pharmaceutical Preparations

Industry Biotechnology & Medical Research

Sector Healthcare

Fiscal Year 12/31





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *				2. I	0 3							ool	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Coiante Scott M				A(AGILE THERAPEUTICS INC [AGRX							AGR		Director 10% Owner				
(Last)	(First)) (Mic	idle)	3. Г	Date	of Earli	est Tr	ansa	action	(MM	/DD/YYYY	7)	•	_X _ Officer (g		· —	Other (speci	fy below)
101 POOR F	ARM R	OAD						1/2	5/20	17								
	(Stre	et)		4. I	f Ar	nendme	nt, Da	ite O)rigina	al Fil	ed (MM/D	D/YYYY	7) (6. Individual o	or Joint/G	roup Filing	(Check Appl	icable Line)
PRINCETO)										=	X Form filed by		rting Person One Reporting P	'erson	
(0.	, (8			on-Der	ivat	ive Secu	ırities	s Ac	quire	ed, Di	isposed (of, or B	ene	eficially Owne	ed			
1. Title of Security (Instr. 3)							3. Trans. Code (Instr. 8)		4. Securities Acquor Disposed of (D (Instr. 3, 4 and 5)		D) Foll		Amount of Securiti lowing Reported T str. 3 and 4)			6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
							Cod	de	v	Amou	(A) or (D)	r Price						(Instr. 4)
	Tabl	le II - Deri	vative Secu	ırities E	Bene	eficially	Owne	ed (e.g. ,	puts	, calls, w	arrant	s, o _]	ptions, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. 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			7. Title and A Securities Un Derivative Se (Instr. 3 and 4		nderlying ecurity		9. Number of derivative Securities Beneficially Owned	Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security			Code	v	(A)		(D)	Date Exerci		Expiration Date	Title		Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Employee Stock Option (Right to Buy)	\$2.26	1/25/2017		A		100000)		<u>(2</u>	2)	1/24/2027	Commo Stock		100000	\$0	100000	D	
Restricted Stock Units	<u>(1)</u>	1/25/2017		A		35000			<u>(</u>	3)	<u>(3)</u>	Commo Stock	-	35000	\$0	35000	D	

Explanation of Responses:

- Each restricted stock unit represents a contingent right to receive one share of common stock.
- (This option was granted on January 25, 2017. 25% of the shares subject to the stock option vest on January 25, 2018, and the remaining shares vest in 36
- 2) substantially equal monthly installments over the following three years such that the option will be fully vested on January 25, 2021.
- (The restricted stock units were granted on January 25, 2017 and vest as follows: 17,500 units will vest and be delivered on January 25, 2018, and 17,500 units
- 3) will vest and be delivered on January 25, 2019.

Reporting Owners

p								
Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Coiante Scott M								
101 POOR FARM ROAD			Chief Financial Officer					
PRINCETON, NJ 08540								

Signatures

 /s/ Scott M. Coiante
 1/27/2017

 *** 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 control number.