FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPROVAL | | | | | | | | |
|---|---------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| 1 | Estimated average b | ourden | | | | | | | |

0.5

hours per response:

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>Lang James Paul</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol OptimizeRx Corp [OPRX] | | | | | | | | (Che | Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Owner | | | | | |
|--|--|--|---|-------|---|---|-----|---|------------------|--|--------------------|----------|---|--|--|---|---|---|--|
| (Last) (First) (Middle) 400 WATER STREET, SUITE 200 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/30/2019 | | | | | | | | - ' | _ | er (give title | | 10% Owner Other (specify below) | |
| (Street) ROCHES (City) | CHESTER MI 48307 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. In Line | Forn | or Joint/Group Filing (Check Applicable in filed by One Reporting Person in filed by More than One Reporting son | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Execution Date, | | | 3. Transaction Code (Instr. 5) 4. Securit Disposed 5) | | | | | | Securi Benefi | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A (D |) or | Price | Transa | action(s) 3 and 4) | | | (|
| Common Stock 09/30/ | | | | |)/2019 | /2019 | | A | | 2,084 | 4 A | | \$0 ⁽¹⁾ | 2 | 22,924 | |) | | |
| 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 I if any (Month/Day | Date, | | ransaction Code (Instr. | | of | | 6. Date Exercisable Expiration Date (Month/Day/Year) | | | and 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | Price of crivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | m: ect (D) ndirect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amou or Numb of Share | er | | | | | |

Explanation of Responses:

1. The Issuer issued these shares to the Reporting Person under the Director Compensation Plan.

/s/ Doug Baker, POA for James 10/02/2019

Lang

** 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.