FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF (| CHANGES | IN BENEFI | CIAL | OWNERSHIP |
|-----------|------|---------|-----------|------|-----------|
| _ | _ | | | _ | - |

OMB APPROVAL

OMB Number: 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).

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* Pinney Jack T | | | | | 2. Issuer Name and Ticker or Trading Symbol OptimizeRx Corp [OPRX] | | | | | | | | (CI | eck all ap | onship of Reporting all applicable) Director | | Person(s) to Issuer 10% Owner | | |
|---|--|------|---------------|---|--|--|--------------------------------------|--|---|-----|---|----------------------|--------------------------------|--|---|---|----------------------------------|--|------------|
| (Last) (First) (Middle) 400 WATER STREET, SUITE 200 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/30/2015 | | | | | | | | | Offic belo | er (give title w) | Other (specify below) | | | |
| (Street) ROCHES (City) | | | 18307 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Lin | e) <mark>X</mark> Fori | or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son | | | |
| | | Tabl | e I - Non | -Deriv | ative | Sec | curitie | s Acc | quired, | Dis | posed o | f, or | Bene | ficia | ly Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Execution Date, | | Transaction Disposed Code (Instr. 5) | | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | Secur Benef | icially d Following | 6. Owner Form: Di (D) or Ind (I) (Instr. | rect direct | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | (A (C | () or () | Price | Transaction(s) | | | | (11311. 4) |
| Common Stock 09/30 | | | | /2015 | | | A | | 6,250 | | A | \$ <mark>0</mark> (1 | 770,829 | | 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) | ve Conversion Date Execution Date, | | Date, | 4. Transaction Code (Instr. 8) | | n of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | B. Price of Derivative Security Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amo or Num of Shar | ber | | | | | |

Explanation of Responses:

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

/s/ Doug Baker, POA for Jack <u>T. Pinney</u>

09/30/2015

** 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.