FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL 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* WASSON GREGORY D | | | | | | 2. Issuer Name and Ticker or Trading Symbol OptimizeRx Corp [OPRX] | | | | | | | | | elationship eck all appli Directo | cable) | ıg Per | rson(s) to Iss 10% Ov | |
|---|--|--|--|---------|--|---|--------|----------------------|---------------------------------------|----------------------------|---------------------------|--|--|----------------------|---|---|---|--|--|
| | TIMIZERX | CORPORATIO | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/30/2022 | | | | | | | | | Officer (give title below) | | | Other (s below) | specify |
| 400 WATER STREET, SUITE 200 | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) | STER N | ¶I . | 48307 | | | | | | | | | | 1 | Form | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (\$ | State) | (Zip) | | | | | | | | | | | | | | | | |
| | | Tabl | le I - Noi | n-Deriv | ative | Sec | uritie | es Ac | quired, | Dis | posed (| of, or B | enef | iciall | y Owne | t | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Date, | | Transaction Disposed | | rities Acqu d Of (D) (I | | | Securitie Benefici Owned F | curities Form | | Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | | v | Amount | (A) (D) | (A) or (D) Price | | | | | Transac | |
| Common Stock 12/30 | | | | /2022 | | М | | 409 | 109 A | | \$0 ⁽¹⁾ | 18,674 | | | 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. Deem Execution if any (Month/Da | Date, | 4. Transaction Code (Instr. 8) | | n of l | | 6. Date Ex Expiration (Month/Da | Date | | Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | urity | 8. Price of Derivative Security (Instr. 5) | | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership tt (Instr. 4) |
| | | | | | Code | v | (A) | | Date Exercisab | | Expiration Date | Title | or | ount nber ires | | | | | |
| Restricted Stock Units | (1) | 12/30/2022 | | | M | | | 409 | (2) | | (2) | Commor Stock | 4 | 09 | \$0 | 0 | | D | |

Explanation of Responses:

- 1. Restricted stock units convert into common stock on a one-for-one basis.
- 2. On December 30, 2021 the reporting person was granted 409 restricted stock units which vested in full on December 30, 2022.

Remarks:

/s/ Marion Odence-Ford, by Power of Attorney

01/04/2023

** 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.