### FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

JRITIES AND EXCHANGE COMMIS	SIOI	١
-----------------------------	------	---

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).

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person*     Stelmakh Edward					2. Issuer Name and Ticker or Trading Symbol OptimizeRx Corp [ OPRX ]								(Che	ck all applic	ctor		10% Ov	vner	
	TIMIZERX	irst) CORPORATIO REET, SUITE 30				3. Date of Earliest Transaction (Month/Day/Year) 10/11/2024							V	below)	Officer (give title pelow)  CFO/CO		Other (specify below)		
(Street) WALTHAM MA 02453  (City) (State) (Zip)					- 4. II	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	Individual or Joint/Group Filing (Check Applicable ne)  Form filed by One Reporting Person  Form filed by More than One Reporting Person					
		Tab	le I - Noi	n-Deriv	ative	Se	curiti	ies Ac	quired	, Dis	posed o	of, or B	enefi	cially	/ Owned	ł			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		Execution Date,		Transaction Disposed C Code (Instr. 5)		rities Acquired (A ed Of (D) (Instr. 3,		or 4 and	Securition Benefici	Amount of ecurities eneficially wned Following		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
									v	Amount	(A) (D)	or Pi	rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 10/1			10/11	/2024				М		8,22	2 A		<b>\$0</b> <sup>(1)</sup>	35	,432	D			
Common	Stock			10/11	1/2024				F		2,066	D \$6.		6.63	.63 33,366		66 D		
		Т	able II -								osed of				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	ed Date,	4. Transa Code ( 8)	action	5. N of Deri Sec Acq (A) ( Disp of (I	Number 6 Erivative curities equired ) or sposed (D) str. 3, 4	6. Date Exercisa Expiration Date (Month/Day/Yea		able and	7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly Owner Form: Direct or Indi	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber					
Restricted Stock	(1)	10/11/2024			M			8,222	(3)	Ì	(3)	Common	8,2	22	\$0	0		D	

## **Explanation of Responses:**

- 1. Restricted stock units convert into common stock on a one-for-one basis
- 2. These shares were withheld by the Issuer to satisfy the Reporting Person's tax withholding obligations. Such withholding is treated as a disposition of securities under Section 16 of the Securities Exchange
- 3. The restricted stock units vest in three equal annual installments beginning October 11, 2022, the first anniversary of the grant date.

#### Remarks:

The filing of this Statement shall not be construed as an admission (a) that the person filing this Statement is, for the purposes of Section 16 of the Securities Exchange Act of 1934, as amended, the beneficial owner of any equity securities covered by this Statement, or (b) that this Statement is legally required to be filed by such person.

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

10/15/2024

\*\* 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.