Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Washington,	D.C. 20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

							· ,			npany Act of							
1. Name and Address of Reporting Person* WASSON GREGORY D				2. Issuer Name and Ticker or Trading Symbol OptimizeRx Corp [OPRX]								Relationshi eck all app	on(s) to Is	ssuer			
												X Direc	Director		10% Owner		
(Last) 400 WAT	(Fir	est) (N ET, SUITE 200	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 08/07/2020								Offic belov	er (give title w)	Other (specify below)		specify
,					4. If A	Amend	ment, Date o	f Origina	al File	d (Month/Day	/Year)			r Joint/Grou	p Filing	(Check A	pplicable
(Street)												Line	,	<i>"</i> ! !! 0	_		
ROCHE	STER M	[4	8307										X Form filed by One Reporting Pe				
														Form filed by More than One Reporting Person			
(City)	(St	ate) (Z	Zip)										. 0.0	···			
		Table	I - No	n-Deriva	tive S	Secui	rities Acq	uired,	, Dis	posed of,	or Ber	neficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date			Executy/Year) if any			3. Transaction Code (Instr. 8)											
1. Title of	Security (Ins	tr. 3)		Date		Exec if any	Deemed ution Date, / th/Day/Year)	Transa Code (Disposed Of			Securi Benefi Owned	cially I Following	6. Own Form: I (D) or I (I) (Inst	Direct ndirect	7. Nature of Indirect Beneficial Ownership
1. Title of	Security (Ins	tr. 3)		Date		Exec if any	ution Date,	Transa Code (Disposed Of			Securi Benefi Owned Report Transa	ties cially I Following	Form: I (D) or I	Direct ndirect	of Indirect Beneficial
1. Title of s		tr. 3)		Date	y/Year)	Exec if any	ution Date,	Transa Code (1 8)	Instr.	Disposed Of 5)	(A) or	7. 3, 4 and	Securi Benefi Owned Report Transa (Instr.	ties cially I Following ted action(s)	Form: I (D) or I	Direct ndirect r. 4)	of Indirect Beneficial Ownership
		,		Date (Month/Day 08/07/2	y/Year) 2020	Executif any (Mon	ution Date, / th/Day/Year)	Transa Code (1 8) Code	v Disp	Disposed Of 5) Amount	(A) or (D) A The Benefit A series and the series are series and the series are series a	Price \$17.4	Securi Benefi Owned Report Transa (Instr.	ties cially d Following ted action(s) 3 and 4)	Form: I (D) or I (I) (Inst	Direct ndirect r. 4)	of Indirect Beneficial Ownership

Explanation of Responses:

/s/ Gregory Wasson

Title

Expiration Date

Date Exercisable

Amount or Number

of Shares

08/11/2020

Transaction(s) (Instr. 4)

** 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).

Code

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.

of (D) (Instr. 3, 4 and 5)

(A) (D)