Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|
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| hours per response: | 0.5 | | | | | | | | |

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 ar | | Reporting Person* | | | | | | | er or Trad p [OPR | _ | symbol | | | | eck all applic Directo | cable) or | g Pers | 10% Ow | ner |
|---|--|-------------------|------------|--|------|--|----------|--|-------------------------|---|--|--|----------------------------------|--|---|--------------|----------------------------------|------------------------------|-----|
| (Last) | ` | irst) CORPORATIO | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/01/2023 | | | | | | | | below) | | nercia | Other (s below) al Officer | респу | |
| 260 CHARLES STREET, SUITE 302 | | | 4. 1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | | | |
| (Street) | AM M | IA | 02453 | | | | | | | | | | | 2 | _ | led by Mor | • | orting Persor n One Repor | |
| (City) | (S | itate) | (Zip) | | Rı | ule | 10b5-: | 1(c) | Trans | acti | on Ind | icatio | n | | | | | | |
| | | | | | | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | | |
| | | Tab | le I - Nor | n-Deriv | ativ | e Se | curities | s Acc | quired, | Dis | posed o | f, or B | ene | ficiall | y Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Trans. Date (Month/I | | | | Execution Date, | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) od Of (D) (Instr. 3, 4 a | | A) or 3, 4 and | | es Forn ially (D) of Following (I) (II | | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | Code | v | Amount (A) or (D) | | or | Price | | saction(s) r. 3 and 4) | | | Instr. 4) | |
| Common Stock 11/0 | | | 11/01 | 1/2023 | | | A | | 18,519 ⁽¹⁾ A | | \$ <mark>0</mark> | 37,038 | | D | | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any | | | | ansaction of ode (Instr. Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4) | | | curity | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | Ownership Form: Direct (D) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | Code | v | (A) | | Date Exercisab | | Expiration Date | Title | or Nu of | umber | | | | | |
| Stock Option | \$8.1 | 11/01/2023 | | | A | V | 35,758 | | (2) | 1 | 1/01/2028 | Commo | | 5,758 | \$0 | 35,758 | 8 | D | |

Explanation of Responses:

- 1. Grant of restricted stock units representing a contingent right to receive shares of OptimizeRx common stock. The restricted stock units will vest in three equal annual installments beginning on November 1, 2024, which is the first anniversary of the date of grant.
- 2. The stock option vests in three equal annual installments beginning November 1, 2024, the first anniversary of the grant date.

Remarks:

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

11/03/2023

** 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.