FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer s Section 16. Form 4 or Form obligations may continue. So Instruction 1(b).	5 ´				
Name and Address of Reporting Person*					

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden 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

Name and Address of Reporting Person* Lawrence Thomas R (Last) (First) (Middle)					CUMBERLAND PHARMACEUTICALS INC [CPIX]										eck all appli X Directo Officer	ationship of Reportir k all applicable) Director Officer (give title below)		10% Ov Other (s	vner
(Last) 2525 WE SUITE 9	EST END A	,	(Middle)		11/	3. Date of Earliest Transaction (Month/Day/Year) 11/16/2012											,		
(Street) NASHV			37203 (Zip)		. 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									dividual or Joint/Group Filing (Check Applicable) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - Noi	n-Deriv	ative	Sec	curiti	ies Ac	quired,	Dis	posed o	of, or	Bene	eficial	ly Owned	t			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea		Execution (Year) if any		2A. Deemed Execution Date, f any (Month/Day/Year)		Transaction D Code (Instr. 5)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Benefici	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount		(A) or (D)	Price	Transac (Instr. 3	tion(s)			(1130.4)	
Common	Common stock			11/16	5/2012				М		8,000	0	A	\$3.5	197	197,576		D	
common	mmon stock			11/16	5/2012				S		6,222	(1)	D	\$4.45	5 191	1,354	D		
		T									osed of onverti				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Date,	Code (Ins				6. Date Ex Expiration (Month/Da	Date		Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)		Owner Form Direct or Inc. (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisab		expiration Pate	Title	0 N 0	lumber					
Options	\$3.5	11/16/2012			M			8,000	01/31/200	03 0	1/31/2013	Comi		8,000	\$0.00	0		D	

Explanation of Responses:

Remarks:

Thomas R. Lawrence by: /s/ Rick S. Greene as attorney-in- 11/16/2012

** 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.

 $^{1. \} Shares sold to \ Cumberland \ Pharmaceuticals \ Inc. \ to \ satisfy \ the \ exercise \ price \ of \ the \ options \ exercised \ on \ 11/16/2012.$