FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Nashington,	DC	20549	
rvasiliigton,	D.C.	20040	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average b	ourden										
hours ner resnonse.	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*  BARBARI SHARON						2. Issuer Name and Ticker or Trading Symbol AGILE THERAPEUTICS INC [ AGRX ]								(Ch	Relationship eck all appli X Directo	,				
(Last) 500 COL	,	irst) AD EAST, SUIT	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/09/2022									Officer below	(give title		Other ( below)	specify	
(Street) PRINCE (City)		tate)	08540 (Zip)	a Domin	-	Line)									E) X Form Form Perso	ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
1 Title of S	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  1. Title of Security (Instr. 3)  2. Transaction 2. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership 7. Nature																			
Date (Month/D					Execution Date,			θ,	, Transaction Disposed Code (Instr. 5)					Securiti Benefic Owned	Securities Form Beneficially (D)		n: Direct r Indirect nstr. 4)	of Indirect Beneficial Ownership		
										Code	v	Amount	nount (A) or (D)				Price	Transac		(Instr. 4)
Common Stock 06/09/					9/2022	/2022			Α		670 <sup>(</sup>	670 <sup>(1)</sup> A		\$ <mark>0</mark>	1,9	1,952(2)		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. Deeme Execution if any (Month/Da	Date, 1		Transaction Code (Instr.				6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	e ercisable		xpiration ate	Title	or Nu of	umber					
Employee Stock Option (Right to	\$1.22	06/09/2022			A		807			(3)	06	5/08/2032	Commo Stock	n	807	\$0	807		D	

## Explanation of Responses:

- 1. These shares represent restricted stock units that were granted on June 9, 2022, which will vest and be settled in common stock on June 9, 2023, subject to the Reporting Person's continued service on the Issuer's board of directors through the vesting date and provided that the Reporting Person attends at least 75% of the board meetings held during the year of board service.
- 2. On April 26, 2022, the Issuer completed a one-for-forty reverse stock split of the Issuer's common stock. This amount has been adjusted to give effect to this reverse stock split.
- 3. This option was granted on June 9, 2022 and vests in full on June 9, 2023, subject to the Reporting Person's continued service on the Issuer's board of directors through the vesting date and provided that the Reporting Person attends at least 75% of the board meetings held during the year of board service.

/s/ Geoffrey P. Gilmore, Attorney-in-fact

06/10/2022

\*\* 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.