FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Vashington,	D.C.	20549		

, D.C. 20549	OMB APPR

OIVID AFFROVAL											
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).

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*  Welsh Amy  (Last) (First) (Middle)  500 COLLEGE ROAD EAST, SUITE 310					3. Da	Issuer Name and Ticker or Trading Symbol     AGILE THERAPEUTICS INC [ AGRX ]      Date of Earliest Transaction (Month/Day/Year)     06/28/2023								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner X Officer (give title below) Chief Commercial Officer				
(Street) PRINCETON NJ 08540  (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
Rule 10b5-1(c) Transaction Indication  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.  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											led to								
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					tion 2A. Deemed Execution Date,		3. Transaction Code (Instr. 8) 4. Sec Dispos		Dispose	urities Acquired (A) ed Of (D) (Instr. 3,			Benefic	ies For cially (D) Following (I) (ed		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock 06/28/2				/2023	2023		Code			13,500 <sup>(1)</sup> A		\$0	(Instr. 3 and 4) 13,500			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 Security  1. Title of Date Execution Date (Month/Day/Year) Derivative Security  3. Transaction Date Execution if any (Month/D				n Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exe Expiration (Month/Day		e and 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		opiration	Title	or Nu of	ımber					
Employee Stock Option (Right to Buy)	\$2.48	06/28/2023			A		4,500		(2)	06	5/27/2033	Commo Stock	on 4,	,500	\$0	4,500		D	

## **Explanation of Responses:**

- 1. These shares represent restricted stock units ("RSUs") which were granted on June 28, 2023. The RSUs will vest in four equal installments over four years upon the anniversary of the grant, such that the RSUs will be fully vested on June 28, 2027.
- 2. This option was granted on June 28, 2023. 25% of the shares subject to the stock option vest on June 28, 2024, and the remaining shares vest in 36 substantially equal monthly installments over the following three years such that the option will be fully vested on June 28, 2027.

/s/ Geoffrey P. Gilmore. 06/30/2023 Attorney-in-fact

\*\* 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.