FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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$\overline{}$	Check this box if no longer subject to					
	Section 16. Form 4 or Form 5 obligations may continue. See					
\cup	obligations may continue. See					
	Instruction 1(b).					

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

					-						прапу Аст			_						
1. Name and Address of Reporting Person* BARBARI SHARON						2. Issuer Name and Ticker or Trading Symbol AGILE THERAPEUTICS INC [AGRX]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>BARBARI SHARON</u>						, ,									V Director	or		10% Ov	vner	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 06/08/2021							1	Officer below)	(give title		Other (s below)	specify		
101 POOR FARM ROAD																				
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	TON N	T	00540												X Form filed by One Reporting Person					
PRINCETON NJ 08540													Form filed by More than One Reporting Person							
(City)	City) (State) (Zip)																			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D.						Execution Date,			Transaction Dispose Code (Instr. 5)		ties Acqu I Of (D) (I			Securitie Benefici Owned F	Securities For Beneficially (D		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	Amount (A) or (D)		Price	Transac				(Instr. 4)			
Common Stock 06/08/					B/202 1	/2021		A		24,510 ⁽¹⁾ A		4	\$0	51	51,296		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. Deemed Execution I if any (Month/Day	Date, T	4. Transacti Code (Ins 8)				6. Date Exercisa Expiration Date (Month/Day/Yea		•	7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i liy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nu of	nount imber ares						
Employee Stock Option (Right to Buy)	\$1.53	06/08/2021			A		29,905		(2)	C	06/07/2031	Commo Stock	ⁿ 29	905	\$0	29,905	5	D		

Explanation of Responses:

- 1. These shares represent restricted stock units that were granted on June 8, 2021, which will vest and be settled in common stock on June 8, 2022, 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. The option was granted on June 8, 2021 and vests in full on June 8, 2022, 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, as Attorney-in Fact

06/10/2021

** 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.