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AGILE THERAPEUTICS INC Form 3 February 24, 2016 **FORM 3** UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Shetty Ajit			2. Date of Event ReStatement(Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol AGILE THERAPEUTICS INC [AGRX]					
(Last)	(First)	(Middle)	02/24/2016		4. Relationship of Reporting Person(s) to Issuer			endment, Date Original nth/Day/Year)		
101 POOR	FARM RC	AD					× ×	, ,		
	(Street)			(C	(Check all applicable)			6. Individual or Joint/Group		
	× ,				icer	10% Ov	vner Filing(Ch _X_Form	eck Applicable Line) filed by One Reporting		
PRINCETO	N, NJÂ	08540		(give title	below)	(specify below		filed by More than One Person		
(City)	(State)	(Zip)	Tab	ole I - Non-Der	vative	e Securities	Beneficial	eneficially Owned		
1.Title of Secu (Instr. 4)	rity			mount of Securitie eficially Owned (r. 4)	O Fe D (I	Ownership C orm: (Direct (D) r Indirect	A. Nature of Ind Ownership Instr. 5)	irect Beneficial		
Reminder: Rep owned directly			ach class of securities	beneficially	SEC	1473 (7-02)				
	inforı requi	mation conta red to respo	pond to the collec ained in this form ond unless the for MB control numbe	are not m displays a						
1	Fable II - De	rivative Secu	rities Beneficially O	wned (e.g., puts, c	alls, wa	arrants, optio	ns, convertible	e securities)		
1. Title of Deri (Instr. 4)	ivative Secur	Expi	ate Exercisable and ration Date //Day/Year) Expiration	3. Title and Amou Securities Underly Derivative Securit (Instr. 4)	ing	4. Conversion or Exercise Price of Derivative Security	- · · · · ·	6. Nature of Indirect Beneficial Ownership (Instr. 5)		

Amount or

Number of

Shares

Title

or Indirect

(Instr. 5)

(I)

Exercisable Date

OMB 3235-0104 Number: January 31, 2005 Estimated average burden hours per response... 0.5

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
Shetty Ajit 101 POOR FARM ROAD PRINCETON, NJ 08540	ÂX	Â	Â	Â		
Signatures						
/s/ Scott M. Coiante, Attorney-in-Fact	02/24/2016					
**Signature of Reporting Person		Date				

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.