FORM 4

(Print or Type Responses)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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— WENNINGER RICHARD E					2. Issuer Name and Ticker or Trading Symbol FEMALE HEALTH CO [FHCO]							S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner					
(Last) (First) (Middle) 14000 GYPSUM CREEK ROAD					3. Date of Earliest Transaction (Month/Day/Year) 03/15/2010							Office	r (give title belo	w)	Other (specify	below)	
(Street) GYPSUM, CO 81637				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City	7)	(State)	(Zip)			Ta	able I -	- Non	-De	rivative S	Securit	ies Acqu	ired, Disp	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year	Execu any	eemed tion Date, if	Code (Instr. 8)		(A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	ount of Securities cially Owned Following ed Transaction(s)		Form:	7. Nature of Indirect Beneficial			
				(Mon	(Month/Day/Year)		Cod	le	V	Amount	(A) or (D)	Price			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common \$.01 per	Stock, pa share	r value	03/15/2010				S			10,000		\$ 6.5588 (1)	2,444,2	223 (3)		D	
Common Stock, par value \$.01 per share		03/16/2010				S			10,000	D	\$ 6.5562	2,434,223 (3)			D		
Common Stock, par value \$.01 per share												34,248			I	By Spouse	
Common Stock, par value \$.01 per share												250,000			I	Note (4)	
Reminder:	Report on a s	separate line	for each class of sec						Pers con the	sons wh tained in form dis	o resp n this t splays	form are a curre	not requesting ntly valid	ction of inf uired to res OMB conf	spond unle	ss	1474 (9-02)
			Table II							isposed of significant of the si			ly Owned				
Security	Conversion Date		Execution I any	d Date, if	4. Transaction Code (Instr. 8)		5.		6. E and	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. T Amo Und Secu	itle and ount of erlying rrities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form o Derivat Security Direct (or Indir	Ownersh (Instr. 4) D) ect
					Code	V	(A)		Dat Exe	e ercisable	Expirat Date	tion Title	Amount or Number of Shares				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
WENNINGER RICHARD E 14000 GYPSUM CREEK ROAD GYPSUM, CO 81637	X	X				

Signatures

James M. Bedore, Power of Attorney	03/16/2010		
**Signature of Reporting Person	Date		

Explanation of Responses:

- * 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).
- (1) The price reported above is the average transaction price. The range of prices for such transactions is \$6.30 to \$6.80. Upon request by the Commission staff, the reporting person will provide full information regarding the number of shares sold at each separate price.
- (2) The price reported above is the average transaction price. The range of prices for such transactions is \$6.50 to \$6.70. Upon request by the Commission staff, the reporting person will provide full information regarding the number of shares sold at each separate price.
- (3) These shares are being sold by the reporting person pursuant to a 10b5-1 trading plan adopted by the reporting person in March 2010.
- (4) These shares are held in a trust as to which Mr. Wenninger is a trustee and beneficiary.

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.