FORM 4

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

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person * WALTON MICHAEL R				2. Issuer Name and Ticker or Trading Symbol FEMALE HEALTH CO [FHCO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) 929 NORTH ASTOR, UNIT 2101					3. Date of Earliest Transaction (Month/Day/Year) 12/23/2011								Office	r (give title belo	w)	Other (special	y belov	v)
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
MILWAUKEE, WI 53202 (City) (State) (Zip)				THE N D is do S in the							ired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if		3. Transact Code (Instr. 8)		ction 4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		ired	5. Amour Beneficia Reported	Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. 7. Ownership Form: B		Beneficial			
				(Month/Day	y Y ear	Cod	le	V	Amou	nt	(A) or (D)	Price	(Instr. 3 and 4)					wnership nstr. 4)
Common Stock, par value \$.01 per share		12/23/2011			G ⁽¹)	V	273,09	98	D	\$ 0	121,958			D			
				Derivative S			t uire	ont he f	tained i form dis	in ti spl	his for ays a c	m are currei	not requesting noting the noting in the noti		ormation spond unle rol numbe	ss	C 147	74 (9-02)
				(e.g., puts, ca	alls, w													1
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Execution Da (Year) any			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			Amo Und Secu	itle and bunt of erlying irities r. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owne Form Deriv Secur Direc or Inc	of ative ity:	Beneficia Ownershi (Instr. 4)	
				Code	e V	(A)		Date Exer	e rcisable	Ex Da	piration ite	Title	Amount or Number of Shares					

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
WALTON MICHAEL R 929 NORTH ASTOR, UNIT 2101 MILWAUKEE, WI 53202	X					

Signatures

/s/ James M. Bedore, Attorney-in-fact	01/04/2012			
**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) Shares were gifted to a grantor retained annuity trust (the "Trust"). The reporting person is not a trustee of the Trust and does not beneficially own any of the shares held by the Trust.

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.