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

	pe Response												11 00		/ N	
1. Name and Address of Reporting Person* DEARHOLT STEPHEN M				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) 36365 TRAIL RIDGE ROAD			3. Date of Earliest Transaction (Month/Day/Year) 08/13/2014						Office	er (give title belo	ow)	Other (specify	pelow)			
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
STEAM! (City		RINGS, CO (State)	80488 (Zip)													
		(State)	1						1					Beneficially	T	1
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)					if Coo	(Instr. 8)		(A) or Disposed of ((Instr. 3, 4 and 5)		of (D)	Beneficia Reported	nt of Securities ally Owned Following Transaction(s)		Form:	7. Nature of Indirect Beneficial	
				(Month/Day/Yea			Code	V	Amoun	(A) or t (D)	Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common per share		r value \$.01	08/13/2014				G	V	7,000	D	\$ 0	1,971,89	99		D	
Common per share		r value \$.01										127,150			I	Note (1)
Common per share		r value \$.01										400,000)		I	Note (2)
Reminder:	Report on a s	separate line fo	r each class of secur	ities benef	icially o	owned		Pers	ons wh ained ir	o respon	m are	e not requ		formation spond unle trol numbe	ss	1474 (9-02)
			Table II - I	Derivative e.g., puts,								lly Owned				
1. Title of Derivative Security (Instr. 3) Price of Derivative Security		3. Transaction Date (Month/Day/\)	3A. Deemed Execution Day Day/Year) any	4. Transaction Code Year) (Instr. 8)		5. Num of Deriv Secur Acqu (A) of Dispo of (D) (Instr	aumber and I (Mor erivative ecurities equired a) or isposed		Date Exercisable I Expiration Date onth/Day/Year)		7. T Amo Und Secu	Title and nount of derlying surities str. 3 and Amount		f 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	Benefici ive Owners (Instr. 4
				Co	de V	(A)	(D)	Date Exer		Expiration Date	Title	or Number of Shares				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
DEARHOLT STEPHEN M						
36365 TRAIL RIDGE ROAD	X					
STEAMBOAT SPRINGS, CO 80488						

Signatures

/s/ James M. Bedore, Attorney-in-fact	08/14/2014

**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 are held by the reporting person's self-directed IRA.
- (2) Shares are held by a trust, of which the reporting person is a trustee.

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.