FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Payson Norman | | | | | | 2. Issuer Name and Ticker or Trading Symbol Progyny, Inc. [PGNY] | | | | | | | | 5. Relationship of Report (Check all applicable) X Director | | | ting Person(s) to Issuer 10% Owner | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-------|------------------------------|---------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|----------------------------------------------------|------------------------------|------------------|------------------------------------------------------------|----------------------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------------------------------------------------------------|-----------------------------------------|--------------------------------|--|--|
| (Last) (First) (Middle) C/O PROGYNY, INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/20/2022 | | | | | | | | | | Office below | er (give title /) | е | Other below | (specify y) | | |
| 1359 BROADWAY, 2ND FL | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | |
| (Street) NEW YORK NY 10018 | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | |
| (City) | City) (State) (Zip) | | | | | | | | | | | | | | | | | | | | |
| | | Table | 1 - N | Ion-Deriva | tive \$ | Secu | rities | Ac | quire | d, Di | sposed o | f, or E | Benefic | iall | y Own | ed | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/N | | | | rear) i | Execution Date, | | | 3. Transa Code (8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 | | | nd 5) Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | | |
| Common Stock | | | | 07/20/2022 | | | | | S ⁽¹⁾ | | 6,618 | D | \$33.4 | (2) | (2) 424,648 | | I | | See footnote ⁽³⁾ | | |
| Common Stock 07/2 | | | | 07/21/20 | .022 | | | | S ⁽¹⁾ | | 6,618 | D | \$33.28 | 3(4) | 418 | 418,030 | | I | See footnote ⁽³⁾ | | |
| Common Stock | | | | | | | | | | | | | | | 122 | ,493 | | I | See footnote ⁽⁵⁾ | | |
| Common Stock | | | | | | | | | | | | | | 8,652 | | | D | | | | |
| | | Tal | ble I | l - Derivati (e.g., pu | | | | | | | posed of, convertil | | | | Owne | d | | | | | |
| Derivative Conversion Date Executive Conversion Date Executive Conversion Date Executive Exe | | | Deemed 4. Cution Date, Train | | nsaction of Derivat Securit Acquir (A) or Dispos of (D) (Instr. 3 and 5) | | mber rative rities ired r osed) | 6. Da | - | rcisable and Date | 7. Titl Amou Secur Unde Deriv Secur | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | Price of erivative ecurity astr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Beneficial Ownership t (Instr. 4) | | | |
| | | | | | Code | v | (A) | (D) | Date Exer | rcisable | Expiration Date | Title | Amount or Number of Shares | | | | | | | | |

Explanation of Responses:

- 1. Shares sold pursuant to a Rule 10b5-1 trading plan entered into on March 9, 2022.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$32.88 to \$33.745, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 3. The reportable securities are directly held by Norman C. Payson and Melinda B. Payson, Trustees of The Norman C. and Melinda B. Payson Revocable Trust.
- 4. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$32.86 to \$33.53, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 5. The reportable securities are directly held by EVO Eagle, LLC. The Reporting Person shares voting and dispositive power over the securities.

/s/ Mark Livingston, Attorney- 07/22/2022 in-Fact

** 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.