FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average b	stimated average burden									

0.5

hours per response:

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

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

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Name and Address of Reporting Person* The color of Alice of Person and Address of Reporting Person and Address of Report Person and Report Person Address and						2. Issuer Name and Ticker or Trading Symbol COLLEGIUM PHARMACEUTICAL, INC									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Fleming Alison B														-		Direc	ctor	100	% Owner	
(Last) (First) (Middle)						[COLL]									X	Office	er (give title v)	Other (specify below)		
(Last)	(FII	St) (wildale)		3. D	3. Date of Earliest Transaction (Month/Day/Year)									Chief Technology Officer				cer	
C/O COLLEGIUM PHARMACEUTICAL, INC.						02/05/2018														
780 DEDHAM STREET, SUITE 800					<u> </u>															
700 DLL	1111111 0111	LLI, JOITE OO	,		4 If	4. If Amendment, Date of Original Filed (Month/Day/Year)								16	6. Individual or Joint/Group Filing (Check Applicable					
					- 4. "	4. II Amenument, Date of Original Filed (Month/Day/Year)									Line)					
(Street)															X	Eorm	n filed by One	e Reporting F	ercon	
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(m)																F 613	OH			
(City)	(St	ate) (Zip)																	
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, o	r Ben	efici	ally C	Owne	ed			
1. Title of S	ecurity (Inst	r. 3)		2. Trans	action				3.	3. 4. Securities Acquired (A)							ount of	6. Ownershi		
		•		Date	DaviVas	Execution Date		n Date,	Transa			d Of (D) (Instr. 3, 4		3, 4 a				Form: Direct (D) or Indirect		
(Month/Da				Dayriea	ay/Year) if any (Month/Day/Year		Code (Instr. 5)						Beneficially Owned Following		(I) (Instr. 4)	Ownership				
								H			100				Reported		``	(Instr. 4)		
									Code	l۷	Amount	(A) or Pri		Price		Transaction(s) (Instr. 3 and 4)				
								+	╁		- ` 			- `						
Common Stock 02/05/2				5/2018	/2018			F		214(1)	¹⁾ D \$2		\$23	3.38 50,509		D				
		_						_										l		
		Та									osed of, onvertib				y Ow	ned				
1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deem		4. Transactio				6. Date Exercisal Expiration Date			7. Title and Amount of			8. Price of		9. Number o	f 10. Ownership	11. Nature	
Security	or Exercise Price of		if any (Month/Day/\	Date,	Code (r. Derivative (Securities		(Month/E							rity	Securities	Form:	Beneficial	
(Instr. 3)				ay/Year)	8)				(, , , , , , , , , , , , , , , , , , ,				derlying		(Instr. 5)		Beneficially			
Derivative Security							Acquired (A) or						Derivative Security (Instr. 3		.		Owned Following	or Indire (I) (Instr.		
							Disposed					and 4)		<u> </u>		Reported Transaction(s) (Instr. 4)	1.,,	"		
						of (D) (Instr. 3, 4 and 5)						(s)								
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					Code	l _v	(A)	(D)	Date Exercisa	, l	Expiration Date	Title	of Sh:	ıres						
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Explanation of Responses:

1. Shares withheld by the Issuer to satisfy applicable withholding taxes upon vesting of restricted stock units.

Remarks:

/s/ Paul Brannelly as Attorney-02/06/2018 In-Fact For Alison B. Fleming

** 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.