FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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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

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

							( ) -				Joinparty Act								
Name and Address of Reporting Person*     Kuhlmann Shirley R.						2. Issuer Name <b>and</b> Ticker or Trading Symbol COLLEGIUM PHARMACEUTICAL, INC [ COLL ]								5. Relationship of Reporti (Check all applicable) Director X Officer (give title				erson(s) to 10% O Other (	wner
(Last)	( LLEGIUN	dle) CAL, INC.	3. Date of Earliest Transaction (Month/Day/Year) 06/26/2023									Λ	below)  EVP and Gen		nera	below) l Counsel			
100 TEC	E	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) STOUGHTON MA 020				72										X	X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City) (State) (Zip)											action In			o a con	tract. ins	struction or w	ritten	plan that is ir	ntended
		X	to sati	sfy the a	affirma	tive de	efense d	conditions of R	ule 10b	5-1(c). See	e Instru	ction 10							
		Tabl	e I -	Non-Deriva	tive S	Secu	rities	Acc	quire	ed, Di	isposed o	f, or	Benefi	cially	/ Owr	ned			
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		ction	4. Securities Disposed Of	ired (A) or nstr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			C					ode	v	Amount	(A) or (D)	Price		Repoi Trans (Instr.	rted action(s) . 3 and 4)				
Common	06/26/2023	3				S <sup>(1)</sup>		16,621		\$21.65	\$21.6544(2)		120,881		D				
Common	06/26/2023	3			S <sup>(1)</sup>		1,363	D	\$22.53	5349(3)		119,518		D					
		Т	able	II - Derivati (e.g., pu							posed of converti				Owne	ed			
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execurity or Exercise (Month/Day/Year) if any			A. Deemed kecution Date, any any anth/Day/Year)	Code 8)	Transaction Num Code (Instr. of 8) Deriv		rative rities nired r osed ) r. 3, 4	Exp (Mod	iration nth/Day	y/Year)	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		Der Sec (Ins	8. Price of Derivative Security (Instr. 5)  (Instr. 5)  (Instr. 4)		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on February 27, 2023.
- 2. The price reported in column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$21.26 to \$22.24, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the U.S. Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnotes (2) and (3) to this Form 4.
- 3. The price reported in column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$22.39 to \$22.59, inclusive.

/s/ Shirley R. Kuhlmann 06/28/2023

\*\* 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.