FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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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

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* Fleming Alison B						2. Issuer Name and Ticker or Trading Symbol COLLEGIUM PHARMACEUTICAL, INC [COLL]									all app Direc	tor 10% er (give title Othe		son(s) to Is 10% O Other (wner
(Last) (First) (Middle) C/O COLLEGIUM PHARMACEUTICAL, INC. 100 TECHNOLOGY CENTER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 05/13/2020								A	below Cł	v) nief Techn	ology	below) y Officer	
(Street) STOUGHTON MA 02072					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	fividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(5)		Zip) 	on Derive	tive	Sacur	ritio	- A c c	nuiroc	N Die	enoced of	or B	onofic	ially	Own	ad			
Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/)					ion	on 2A. Deemed Execution Date		ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		ed (A) or	or 5. Amo and 5) Securing Benefic Owned		ount of 6. C ties For cially (D)		n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										v	Amount	(A) or (D)	Price	Transa					
Common	020				S ⁽¹⁾		5,261	D	\$21.	12 ⁽²⁾	10	105,629		D					
Common Stock 05/13/20						020					2,728	D	\$22.	74 ⁽³⁾	102,901			D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	titive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expira	e Exer ation D h/Day/		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Der Sec (Ins	Price of ivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		(A)	(D)	Date Exerc	isable	Expiration Date		Amount or Number of Shares						

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 March 13, 2020.
- 2. The price reported in column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$20.89 to \$21.64, 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 \$22.19 to \$22.98, inclusive.

Remarks:

/s/ Paul Brannelly as Attorney-05/15/2020 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.