FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPR	OVAL							
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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* Heffernan Michael Thomas						2. Issuer Name and Ticker or Trading Symbol COLLEGIUM PHARMACEUTICAL, INC COLL										all app Direc	o of Reportin licable) tor er (give title	:	10% O	
(Last) (First) (Middle) C/O COLLEGIUM PHARMACEUTICAL, IN 100 TECHNOLOGY CENTER DRIVE			INC.		3. Date of Earliest Transaction (Month/Day/Year) 05/15/2019										below			pelow)		
(Street) STOUGHTON MA 02072 (City) (State) (Zip)					_ 4. If	4. If Amendment, Date of 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						
		Tabl	e I - No	on-Deriv	<i>r</i> ative	Sec	uritie	s Ac	quired	l, Dis	sposed o	f, or	Bene	eficia	ally O	wne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,					ties Acquired (A) o l Of (D) (Instr. 3, 4			15)	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or	Price		Transaction(s) (Instr. 3 and 4)				(11341.4)
Common Stock 05/15.				/2019	2019			S ⁽¹⁾		18,483	I) (\$12.74(2)		188,586		D			
Common Stock 05,				05/15/	/2019				S ⁽¹⁾		6,517	I) !	\$13.13		13 ⁽³⁾ 182,069		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)	rivative curity or Exercise price of Derivative Security Date (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Signature part of the price of Derivative Security		4. Transa Code (8)	Instr.	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Fyercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		ount nber	8. Pric Deriva Secur (Instr.	itive ity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	(D)	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 November 15, 2018.
- 2. The price reported in column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$12.41 to \$12.99, 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).
- 3. The price reported in column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$13.00 to \$13.43, inclusive.

Remarks:

/s/ Paul Brannelly as Attorney-

In-Fact For Michael T.

05/17/2019

Heffernan

** 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.