FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL
	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).

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*							2. Issuer Name <b>and</b> Ticker or Trading Symbol COLLEGIUM PHARMACEUTICAL, INC										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Hefferr</u>	nan Micha	ael Thomas		COLLEGIUM PHARMACEUTICAL, INC											or	,		vner				
<i>a</i>	·	irst)	- L	[ COLL ]										X Officer	(give title	Other (specify below)		specify				
(Last) 780 DEE	Fi DHAM STR			of Earli 2 <mark>016</mark>	est Tran	saction	(Mon	ith/E	ay/Year)		•	Chairman, President and		,	)							
(Ctroot)			4. 11	Ame	endmei	nt, Date	of Origi	nal Fi	iled	(Month/D		6. Individual or Joint/Group Filing (Check Applicable										
(Street) CANTON MA 02021													Lin	X Form filed by One Reporting Person								
														Form filed by More than One Reporting								
(City) (State) (Zip)														Perso	n							
		Tab	le I - No	n-Deriv	ative/	Se	curit	ies Ac	quire	d, D	isp	osed c	of, o	Ber	eficial	ly Owned	k					
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)						ar)	2A. Dee Executi if any (Month	Cod	nsacti le (Ins		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				Benefici	es	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct I	7. Nature of Indirect Beneficial Ownership			
									Cod	le V	,	Amount		(A) or (D)	Price	Reported Transact (Instr. 3	tion(s)	.,,		Instr. 4)		
Common	Stock		5/2016	/2016			M			9,673	9,673		\$3.3	1 383	383,117		D					
Common	Stock		5/2016	2016						3,931	1	A	\$0.4	3 387	387,048		D					
Common Stock															163	163,043		I 1	By: Island View Investors, LLC <sup>(1)</sup>			
		7									-	sed of onverti			-	Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transactio Code (Inst 8)		of Deri Sec Acq (A) ( Disp of (I	oosed D) tr. 3, 4	6. Date Expira (Month	ion D	ate	ble and	7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and 4		Security I 4)	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable		opiration	Title		Amount or Number of Shares							
Stock Option (Right to Purchase)	\$3.31	04/05/2016			M			9,673	(2		11	/11/2020	Com Sto		9,673	\$0	0		D			
Stock Option (Right to	\$0.48	04/05/2016			М			3,931	(3)		01	./30/2023	Com		3,931	\$0	3,013		D			

## **Explanation of Responses:**

- 1. Shares held by Island View Investors, LLC. Mr. Heffernan is the sole member of Island View Investors, LLC.
- 2. All 9,673 options are exercisable.
- 3. The options vest and become exercisable in equal installments (rounded up to the nearest whole option) at the end of each month over a 4-year period commencing on January 24, 2013. The option was initially for 14,492 options and the option was previously exercised as to 7,548 options.

## Remarks:

/s/ Paul Brannelly as Attorney-

In-Fact For Michael T.

04/07/2016

\*\* Signature of Reporting Person

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.