FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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

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

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person*     Heffernan Michael Thomas				2. Issuer Name and Ticker or Trading Symbol COLLEGIUM PHARMACEUTICAL, INC [ COLL ]									(Ch	eck all app  X Direct	ationship of Reportir c all applicable) Director		10% Ov	wner	
(Last)	(Fii LLEGIUM	rst) (M	Middle)	INC.	3. Date of Earliest Transaction (Month/Day/Year) 05/16/2024											Officer (give title below)		Other (s below)	pecify
100 TECHNOLOGY CENTER DRIVE				4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) STOUGI	(Street) STOUGHTON MA 02072														X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	City) (State) (Zip)				Rul	Rule 10b5-1(c) Transaction Indication													
					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Exec if an	Deemed cution Date, ny nth/Day/Year)				es Acquired (A) Of (D) (Instr. 3, 4			Benefic Owned	ies cially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or	Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)
Common Stock 05/16/2				/2024				A		7,693(1)	) A		\$ <mark>0</mark>	45,508			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)	erivative   Conversion   Date   Execution Date, or Exercise   (Month/Day/Year)   if any			on Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirati (Month/	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber					

## **Explanation of Responses:**

1. Reflects the grant of restricted stock units ("RSUs"). Each RSU represents a contingent right to receive one share of the Issuer's common stock. The RSUs vest on May 16, 2025, subject to the director's continued service with the Issuer. The RSUs will be settled on such date, or, upon the election of the director, on the earlier of the end of the director's service on the Board of Directors, the director's death or disability, or a change in control of the Issuer, in shares of the Issuer's common stock.

> /s/ Shirley R. Kuhlmann as Attorney-in-Fact for Michael 05/16/2024

T. 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.