FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
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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

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1. Name and Address of Reporting Person* Fleming Alison B				2. Issuer Name and Ticker or Trading Symbol COLLEGIUM PHARMACEUTICAL, INC COLL							elationship o eck all applio Directo	cable)	g Person(s) to I	Owner			
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year)						2	Officer below)	(give title	Other below	(specify)			
780 DEDHAM STREET, SUITE 800					02/10/		saction (iv	iontn/L	Day/Year)				Ch	ief Techn	ology Office	ı	
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
CANTON MA 02021													_	, ,			
(City)	(S	tate)	(Zip)											Form filed by More than One Reporting Person			
		Tab	le I - Noi	n-Deriv	ative S	ecurities Ac	quired,	Dis	oosed o	f, c	r Ben	eficiall	y Owned				
Date			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year	3. Transaction Code (Instr. 8)							es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount		(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 01/2				01/27	/2017		A ⁽¹⁾	V	1,240 A S		\$10.0	8,	451	D			
Common Stock ⁽²⁾ 02/10/				/2017		A		16,250 A		\$0	24,	,701	D				
		-				curities Acqu Is, warrants							Owned				
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution D rity or Exercise (Month/Day/Year) if any		Date, T	ransaction ode (Instr.		6. Date E Expiratio (Month/D	n Date			Securitie: derlying rivative S	s security	Derivative derivativ Security Securitie		Ownersh Form: Direct (D or Indirect	Beneficia Ownersh (Instr. 4)		

Explanation of Responses:

\$15.27

1. These shares were acquired under the Collegium Pharmaceutical, Inc. 2015 Employee Stock Purchase Plan in a transaction that was exempt under both Rule 16b-3(d) and Rule 16b-3(c).

of (D) (Instr. 3, 4 and 5)

(A)

32,500

(D)

2. Reflects the grant of restricted stock units. Each restricted stock unit represents a contingent right to receive one share of the issuer's common stock. The restricted stock units vest over a four-year period commencing on February 10, 2017. Twenty-five percent (25%) of the restricted stock units vest on February 10, 2018, and the balance of the restricted stock units vest in equal installments every six months (in each case, rounded up to the nearest whole share of common stock) over the remaining three years of the four-year period, subject to the employee's continued service with the issuer. The restricted stock units will be settled on each applicable vest date in shares of the issuer's common stock.

Exercisable

(3)

Expiration Date

02/10/2027

Title

Stock

3. The option vests and becomes exercisable over a four-year period commencing on February 10, 2017. Twenty-five percent (25%) of the option vests and becomes exercisable on February 10, 2018, and the balance vests in equal quarterly installments (rounded up to the nearest whole share of common stock) over the remaining three years of the four-year period, subject to the employee's continued service with the

Remarks:

Stock

(Right to

Purchase'

/s/ Paul Brannelly as Attorney-In-Fact For Alison B. Fleming

Amount or Number

of Shares

32,500

\$<mark>0</mark>

02/14/2017

Transaction(s) (Instr. 4)

32,500

D

** 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).

02/10/2017

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

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.