FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL											
OMB Number:	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).

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* Ciaffoni Joseph					2. Issuer Name and Ticker or Trading Symbol COLLEGIUM PHARMACEUTICAL,							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Claffor	<u>n Joseph</u>				INC [COLL]							X Director		tor		10% O	wner			
(Last)	(Fi	rst) (N	Middle)			<u></u>								X	Office below	er (give title v)		Other (below)	specify	
C/O COI	LEGIUM	PHARMACEUT	ΓΙCAL	. INC.				Trans	action (N	Month	/Day/Year)				President and CEO					
		Y CENTER DRI		,	01/0	01/04/2021														
					4. If A	Amend	ment.	Date o	f Origina	al File	d (Month/Da	v/Year	,	6. Individual or Joint/Group Filing (Check Applicable						
(Street)							,				. (J	´	Line)				•		
STOUGI	HTON M	A 0.	2072											X		filed by One		J	- 1	
-															Form Perso	filed by Mo	re tha	in One Rep	orting	
(City)	(St	ate) (Z	Zip)			1,5,55,1														
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	icially	/ Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A. Securities Acquired				4 and Secur Benef Owne		rities For icially (D d Following (I)		wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership						
						Code V Amount (A) or Pri						ice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock 01/04/2				01/04/2	2021			F		1,090(1)	Г	D \$20		184,256			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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)		Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) Amoun or Numbe of Title Shares		De Se (In:	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

1. Shares withheld by the Issuer to satisfy applicable withholding taxes upon vesting of restricted stock units.

Remarks:

/s/ Paul Brannelly as Attorney-01/06/2021 In-Fact For Joseph Ciaffoni

** 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.