FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL						
OMB Number:	3235- 0104					
Estimated average burden						
hours per	0.5					

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person* Tupper Colleen	2. Date of Event Requiring Statement (Month/Day/Year) 05/24/2021 3. Issuer Name and Ticker or Trading Symbol COLLEGIUM PHARMACEUTICAL, INC [COLL]						COLL]	
(Last) (First) (Middle) C/O COLLEGIUM PHARMACEUTICAL, INC.			Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)		
100 TECHNOLOGY CENTER DRIVE			X Officer (give title below) Other (specify below) EVP & Chief Financial Officer		(specify 6. (Cl	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) STOUGHTON MA 02072	-					Form filed Reporting	by More than One Person	
(City) (State) (Zip)								
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)		E	2. Amount of Securities Beneficially Owned (Instr. I)	3. Owner Form: I (D) or li (I) (Inst	Direct Owr ndirect	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
No securities beneficially owned			0	I				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable an Expiration Date (Month/Day/Year)		ate	Underlying Derivative Security (Instr. 4) Conversion or Exerc		4. Conversion or Exercise Price of	cise Form:	6. Nature of Indirect Beneficial Ownership (Instr.	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)	

Explanation of Responses:

Remarks:

/s/ Shirley R. Kuhlmann as

Attorney-In-Fact For

05/24/2021

<u>Colleen Tupper</u>

** Signature of Reporting

Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

 $^{^{\}star\star} \ Intentional \ misstatements \ or \ omissions \ of facts \ constitute \ Federal \ Criminal \ Violations \ See \ 18 \ U.S.C. \ 1001 \ and \ 15 \ U.S.C. \ 78 \ ff(a).$

POWER OF ATTORNEY

KNOW ALL BY THESE PRESENTS, that the undersigned hereby constitutes and appoints Joseph Ciaffoni and Shirley R. Kuhlmann with full power to act singly, as the undersigned's true and lawful attorneys-in-fact, with full power of substitution, to:

- (1) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director and/or beneficial owner of Collegium Pharmaceutical, Inc. (the "Company"), Forms 3, 4, and 5 in accordance with Section 16(a) of the Securities Exchange Act of 1934, as amended, and the rules thereunder;
- (2) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Forms 3, 4 or 5, complete and execute any amendment or amendments thereto and timely file such forms with the United States Securities and Exchange Commission and any stock exchange or similar authority; and
- (3) take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the best interest of, or legally required by, the undersigned, it being understood that the documents executed by such attorney-in-fact on behalf of the undersigned pursuant to this Power of Attorney shall be in such form and shall contain such terms and conditions as such attorney-in-fact may approve in such attorney-in-fact's discretion.

The undersigned hereby grants to the attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary or proper to be done in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as the undersigned might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that such attorney-in-fact, or such attorney-in-fact's substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted.

revoked by the undersigned in a signed writing delivered to the attorney-in-fact.

The undersigned has caused this Power of Attorney to be executed as of the 24th day of May, 2021.

/s/Colleen Tupper

Name: Colleen Tupper

Title: EVP and Chief Financial Officer