SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB	APPROVAL	

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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											Est	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5					
matruci	uon 1(b).		Theu					nvestment C									
1. Name and Address of Reporting Person [*] HUSSUSSIAN GUY					2. Issuer Name and Ticker or Trading Symbol <u>Columbia Care Inc.</u> [CCHW]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title V Other (specify				
(Last) (First) (Middle) C/O COLUMBIA CARE INC.				3. Date of Earliest Transaction (Month/Day/Year) 07/31/2023								Former Chief Data Officer					
680 FIFTH AVENUE, 24TH FLOOR				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)				Applicable	
(Street) NEW YO	(Street) NEW YORK NY 10019													X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication												
								defense cond			·				-		
		Table	I - Non-Deriva	tive So	ecui	rities	Acq		sposed of	f, or E	Benefi	cially Owr	ned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				y/Year) if any		Deemed ocution Date, 1y nth/Day/Year)		Transaction Dispos Code (Instr. and 5)		ities Acquired (A d Of (D) (Instr. 3,		4 Securi Benefi Owned	cially d Following	For (D) g Indi	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code V					Amount		(A) or (D) Price		Transaction(a)		50.4)	(Instr. 4)		
	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5.		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	e es ally g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
Exploratio	n of Respon			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
⊏xpianati0	n or Respon	553.															

/s/ David Sirolly as attorneyin-fact for Guy Hussussian

08/08/2023

** Signature of Reporting Person Date

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

 \ast 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.