FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
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Check this box if no longer subject	STA
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

TEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* HART DAVID JAMES				<u>Ca</u>	2. Issuer Name and Ticker or Trading Symbol Cannabist Co Holdings Inc. [CBSTF]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Chief Executive Officer				
(Last) (First) (Middle) C/O THE CANNABIST COMPANY HOLDINGS					3. Date of Earliest Transaction (Month/Day/Year) 03/18/2024												
INC. 680 FIFTH AVENUE, 24TH FLOOR				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) NEW YORK NY 10019				R	Form filed by More than One Reporting Person Rule 10b5-1(c) Transaction Indication												
(City) (State) (Zip)					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 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea			ear) i	2A. Deemed Execution Date, r) if any (Month/Day/Year)		Co	Transacti Code (Ins					Beneficially Owned Following		Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Co	de	v /	Amount (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)					
Common Shares 03/18/2024			4				P		100,000	A	\$0.2635	(1) 1,19	1,196,153		D		
Common Shares												14,	14,000		I	Held in Individual Retirement Account	
	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) Securities Acquirer (A) or Dispose of (D) (Instr. 3, and 5)				Expiration Date (Month/Day/Year) Expiration Date (Month/Day/Year) Security Derivati Security 3 and 4)				ount of urities lerlying ivative urity (Instr. nd 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (E or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)
								Dat Exe	te ercisabl	Expiration le Date	n Title	Amount or Number of Shares					

Explanation of Responses:

1. The purchase price reported above is an average weighted price. These shares were purchased in multiple transactions at price ranging from \$0.257 to \$0.265, inclusive. The reporting person undertakes to provide to The Cannabist Company Holdings Inc., any security holder of The Cannabist Company Holdings Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

/s/ David Sirolly as attorneyin-fact for David Hart

03/18/2024

** 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.