FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20540
vvasiiiigtoii,	D.C.	20048

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* WATSON DEREK								and Tick						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last)	ast) (First) (Middle) /O COLUMBIA CARE INC.					3. Date of Earliest Transaction (Month/Day/Year) 05/03/2023 X									below)	Officer (give title Other (specify below) Chief Financial 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)													
(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														
			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.																	
		Tab	le I - Nor	า-Deriv	ative	e Se	curit	ies Ac	qui	ired, [Disp	oosed o	f, or E	Bene	eficiall	y Owned				
Date					action 2A. Deemed Execution Date, if any (Month/Day/Year)			,	Transaction Disposed Code (Instr. 5)		rities Acquired (A) ad Of (D) (Instr. 3, 4			5. Amour Securitie Beneficia Owned F Reported	es For ally (D) Following (I) (: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									_[Code	v	Amount	ount (A) or (D)		Price	Transact (Instr. 3 a	action(s)			(Instr. 4)
Common Shares 05/03						M 53,986 A (1)		63,	63,986		D									
Common Shares 05/03.					3/2023	3				M		41,52	41,528 A		(1)	105	105,514		D	
		-	Гable II -									sed of, onvertil				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, T	ransaction Code (Instr.				Exp	6. Date Exercisabl Expiration Date (Month/Day/Year)		.	of Securit		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				C	Code	v	(A)	(D)	Dat Exe	te ercisabl		expiration Date	Title	0 0	Amount or lumber of Shares					
Restricted Stock Units	\$0	05/03/2023			M			53,986		(2)		(2)	Commo		53,986	(1)	161,96	1	D	
Restricted Stock	\$0	05/03/2023			M			41,528		(2)		(2)	Commo		11,528	(1)	124,58	5	D	

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of the Issuer's common stock.
- 2. The RSUs were granted on March 31, 2022, and vest as follows: 1/4 annually on March 31, 2023, March 31, 2024, March 31, 2025, and March 31, 2026, with settlement of vested RSUs to occur as soon as practicable following the vesting date.

/s/ David Sirolly as attorney-in-05/05/2023 fact for Derek Watson

** 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.