FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549
vvasilington,	D.O.	20070

OMB APPROVAL										
OMB Number:	3235-0287									
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>VITA NICHOLAS</u>					2. Issuer Name and Ticker or Trading Symbol Cannabist Co Holdings Inc. [CBSTF] 3. Date of Earliest Transaction (Month/Day/Year)									5. Relationship of Reportin (Check all applicable) X Director Officer (give title			rson(s) to Is 10% O	wner		
(Last)	(Fi	rst) (M	Middle)			04/23/2024								belo			below)	specify		
C/O THE CANNABIST COMPANY HOLDINGS INC.					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
680 FIFTH AVENUE, 24TH FLOOR															X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(Street) NEW YO	ORK N	<i>Y</i> 1	0019		Rul	Rule 10b5-1(c) Transaction Indication														
(City)	(St	ate) (Ž		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 - Noı	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or B	enefic	ially Owr	ed					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Execution Date,		Transaction Disposed C Code (Instr. 5)		es Acquired (A) or Of (D) (Instr. 3, 4 and		nd Securi Benefi Owner	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership							
								Code	v	Amount	(A) or (D) Pr		Transa	Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common Shares 04/23/2				2024)24		Α		177,771 A		(1) 1,3	38,193		D					
Common Shares														17,	327,075		I	Held by Vita Holdings LLC ⁽²⁾		
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)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercis	able	Expiration Date		Amount or Number of Shares							

Explanation of Responses:

- 1. Represents performance share units ("PSUs") granted to the reporting person on March 23, 2021, for which the Compensation Committee has determined the criteria to have been met. Each PSU represents a contingent right to receive one share of the Issuer's common stock.
- 2. Held by Vita Holdings LLC, a company owned and controlled by the reporting person.

/s/ David Sirolly as attorney-04/24/2024 in-fact for Nicholas Vita

** 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.