SEC Form 4	
------------	--

Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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

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

			or Section So(ii) of the Investment Company Act of 1940						
1. Name and Address of Reporting Person [*] HOFFMASTER FORREST			2. Issuer Name and Ticker or Trading Symbol <u>Medicine Man Technologies</u> , Inc. [SHWZ]		5. Relationship of Reporting Person(s) to Iss (Check all applicable) Director 10% Ow				
(Last) C/O MEDIC	(First) INE MAN TEC	(Middle) HNOLOGIES, INC.	3. Date of Earliest Transaction (Month/Day/Year) 11/21/2023	X	Officer (give title below) Chief Financia	Other (specify below) I Officer			
C/O MEDICINE MAN TECHNOLOGIES, INC. 865 N. ALBION ST., STE. 300 (Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	vidual or Joint/Group Fili Form filed by One Re Form filed by More th	porting Person			
DENVER (City)	(State) (Zip)		Rule 10b5-1(c) Transaction Indication		Person				
			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/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)	
Common Stock	11/21/2023		Р		7,912	A	\$0.5759	7,912	D		
Common Stock	11/27/2023		Р		8,000	A	\$0.5875	15,912	D		
Common Stock	11/29/2023		Р		9,088	Α	\$0.5793	25,000	D		

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. Transa Code (8)	action of			of Expiration Date (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		of Expiration Date (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4				8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

/s/ Forrest Hoffmaster

** Signature of Reporting Person Date

01/16/2024

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.