FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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

Check this box to indicate that a
transaction was made pursuant to a
contract, instruction or written plan for
the purchase or sale of equity
securities of the issuer that is intended
to satisfy the affirmative defense
conditions of Rule 10b5-1(c). See
Instruction 10

Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol Medicine Man Technologies Inc. [SUW7] (Check all applicable)														
HOFFMASTER FORREST					Medicine Man Technologies, Inc. [SHWZ]] [(c)	Directo	,		10% Ow	ner		
														(give title		Other (sp	pecify		
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)								below) Chief Financial Officer						
C/O MEDICINE MAN TECHNOLOGIES, INC.						08/28/2024								Cilier Fillancial Officer					
865 N. ALBION ST., STE. 300																			
-				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)					Line)										O				
DENVE	R C	O	80220		Form filed by One Reporting Pers								•						
				-									Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				е	action 2A. Deemed Execution Date if any (Month/Day/Yea			Code (Instr.			ed (A) or str. 3, 4 and	Beneficia Owned F	es Form ally (D) o Following (I) (In		: Direct III Indirect E str. 4) C	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount (A) or (D)		Price	Reported Transact (Instr. 3 a	action(s)			Instr. 4)		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
				' ' '	, cai	,							1						
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, Irity or Exercise (Month/Day/Year) if any			Code (ransaction Derivative ode (Instr. Securities			6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and A of Securities Underlying Derivative Se (Instr. 3 and 4)			ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	ode V (A) (D) Exerci					piration	Title	Amount or Number of Shares		(Instr. 4)					
Stock Option (Right to Buy)	\$1.03	08/28/2024		A		282,284		(1)	08/	/28/2034	Class A Common Stock	282,284	\$0	282,28	34	D			

Explanation of Responses:

1. The options vest in four equal installments, beginning May 3, 2025.

/s/ Forrest Hoffmaster

10/07/2024

** 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.