FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

gton, D.C. 20549			
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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

1. Name and Address of Reporting Person* Ruden Brian					2. Issuer Name and Ticker or Trading Symbol Medicine Man Technologies, Inc. [SHWZ]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner					
(Last) (First) (Middle) C/O MEDICINE MAN TECHNOLOGIES, INC.					3. Date of Earliest Transaction (Month/Day/Year) 11/30/2022									Officer (below)	give title		Other (s below)	pecify	
4880 HAVANA ST., STE. 201					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ind Line)	6. Individual or Joint/Group Filing (Check Applicable						
(Street) DENVER CO 80239											1 ′	X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(St	ate)	(Zip)																
		Та	ıble I - Non-D	erivati	ive Se	ecur	rities	Acqui	ired,	Disp	osec	d of, or E	Benef	icially	Owned				
Date				Execution/Day/Year) if any				Transa Code (I			A) or , 4 and 5)	and 5) Securities Beneficiall Owned Fo		Form:	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amou	nt (A	() or ()	Price	Reported Transactio (Instr. 3 an			(Instr. 4)	
			Table II - De (e.g									of, or Be			wned			,	
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)	Code (Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)			Derivative	9. Numb derivativ Securitie Beneficis Owned Followin Reported Transact (Instr. 4)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership t (Instr. 4)
				Code	v	(A)	(D)	Date Exerci	isable	Expir Date	ation	Title	Amou Numb Share	er of					
Series A Cumulative Convertible Preferred Stock	\$1.2 ⁽¹⁾	11/30/2022		S			1,781	(2	2)	(2	2)	Common Stock	1,72	7,214 ⁽³⁾	\$1,000	5,64	.6	D	

Explanation of Responses:

- 1. Subject to adjustment, as described in the Certificate of Designation of Series A Cumulative Convertible Preferred Stock (the "Certificate of Designation") of Medicine Man Technologies, Inc. (the "Company").
- 2. The shares of Series A Cumulative Convertible Preferred Stock (the "Series A Preferred Shares") are convertible into shares of the Company's common stock (the "Common Shares") upon the events specified in the Certificate of Designation. The Series A Preferred Shares have no expiration date.
- 3. Represents the number of Common Shares issuable upon conversion of the Series A Preferred Shares on the date of the reported transaction. Each Series A Preferred Share shall be convertible into that number of Common Shares equal to the preference amount (initially \$1,000) plus any accrued dividends with respect to such share, divided by the conversion price (initially \$1.20), subject to adjustment as set forth in the Certificate of Designation. The Series A Preferred Shares earn a cumulative dividend of 8% per annum.

/s/ Daniel R. Pabon attorney in 12/02/2022 fact for Brian Ruden

** 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.