FORM 4

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

OMB APPE	ROVAL
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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 OF SECURITIES

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 Fireman Robert N			2. Issuer Name and Ticker or Trading Symbol MARIMED INC. [MRMD]						X	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director _X_ 10% Owner					
C/O MARIMED INC., 10 OCEANA WAY				3. Date of Earliest Transaction (Month/Day/Year) 11/17/2020						X	X_ Officer (give title below) Other (specify below) President and CEO				
(Street) NORWOOD,, MA 02062				4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person uired, Disposed of, or Beneficially Owned					
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqu										es Acquired	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		e, if Code (Instr.	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
						Cod	e V	Amount	(A) or (D)	Price	or Indire (I)			(Instr. 4)	
Common	stock		11/17/2020			М		100,000	A	\$ 0.14 23	,555,218	1)		D	
											number.				
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	(e.g., po 4. Transact Code	tion De See Ac or (D	curities quired (A) Disposed of)	6. Date Expiration (Month/D	onvertible tercisable a Date	securi	ficially Ow	ned I Amount ing		9. Number of Derivative Securities Beneficially Owned Following Reported	of 10. Owners Form o Derivat Security Direct (or Indir	Benefici Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	(e.g., po 4. Transact Code	tion De See Ac or (D (In	s, warrants. Number of rivative curities quired (A) Disposed of) str. 3, 4,	6. Date Expiration (Month/D	ercisable and Date any/Year)	securi	ficially Ow ities) 7. Title and of Underly Securities	ned I Amount ing	Derivative Security	Derivative Securities Beneficially Owned Following	Owners Form of Derivat Security Direct (or Indir	hip of Indire Benefici Ownersl (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative Security	Date	3A. Deemed Execution Date, if any	(e.g., pt 4. Transact Code (Instr. 8)	tion De See Ac or (D (In and	s, warrants. Number of rivative curities quired (A) Disposed of) str. 3, 4,	options, c 6. Date Exercisation (Month/D) Date Exercisab	ercisable and Date an	ind ion	ficially Owities) 7. Title and of Underly Securities (Instr. 3 and Title Common Stock,	Amount or Number of Shares	Derivative Security	Derivative Securities Beneficially Owned Following Reported Transaction	Owners Form o Derivat Security Direct (or Indir	hip of Indire Benefici Ownersl (Instr. 4)

Reporting Owners

D 41 0 N 4	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Fireman Robert N C/O MARIMED INC. 10 OCEANA WAY NORWOOD,, MA 02062	X	X	President and CEO				

Signatures

/s/ Robert N. Fireman	03/19/2021
Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) Includes 6,684,640 shares of common stock held in the name of the RNF Holdings Trust.
- (2) Immediately.
- (3) Not applicable.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.