<b>FORM</b>	4
-------------	---

Г

1	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 Number: 3235-0287 Estimated average burden hours per response... 0.5

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Instruction 1(b). Company Act of 1940

(Print or Type Responses)									1		
1. Name and Address of Reporting Person <sup>*</sup> – Levine Jon R			2. Issuer Name and MARIMED INC.		-	Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			
(Last) C/O MARIMED INC.,	(First) 10 OCEANA W	7 4 3 7	3. Date of Earliest Transaction (Month/Day/Year) 07/09/2021						_X_Officer (give title below)Other (specify below)CFO, Treasurer and Secretary		
(Street) NORWOOD,, MA 02062			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing/Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)		Table I - N	on-De	erivative	Securities	s Acqu	ired, Disposed of, or Beneficially Owned	1	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transacti Code (Instr. 8) Code	on V	(A) or D	(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Beneficial Ownership
Common stock									19,985,343	D	
Common stock									6,684,640	I	By the Jon Levine Family Trust (1)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in SEC 1474 (9-02) this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
	Conversion		3A. Deemed Execution Date, if any (Month/Day/Year)	Code	tion )	5. Number of Derivative Securities Acquired (A) Disposed of (Instr. 3, 4, a 5)	) or (D)	6. Date Exer Expiration I (Month/Day	Date	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Derivative C Security Securities F (Instr. 5) Beneficially E Owned S Following E Reported 0		e Ownership s Form of lly Derivative Security: g Direct (D) or Indirect	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)	(I) (Instr. 4)	
Option to buy common stock	\$ 0.88	07/09/2021		А		5,000,000		(2)	07/09/2026	Common Stock, par value \$.001 per share	5,000,000	<u>(3)</u>	5,000,000	D	
Option to buy common stock	\$ 0.63							<u>(4)</u>	12/31/2021	Common Stock, par value \$.001 per share			100,000	D	

# **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Levine Jon R C/O MARIMED INC. 10 OCEANA WAY NORWOOD,, MA 02062	х		CFO, Treasurer and Secretary					

## Signatures

/s/ Jon R. Levine	07/13/2021
**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) These shares are held in trust for the benefit of the reporting person's spouse and children. The reporting person disclaims beneficial ownership of these securities, and the filing of this report is not an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.
- (2) Granted to the reporting person on July 9, 2021 (the "Grant Date"), this option is exercisable to acquire 50% of the underlying shares on the Grant Date and 100% of the shares on or after the one-year anniversary of the Grant Date.
- (3) Not applicable.
- (4) Immediately.

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.