FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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| shington, | D.C. | 20549 | | |

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| | OMB Number: | | 3235-0287 |
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| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Estimated average burden hours per response: 0.5 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* Gorelik Ran | | | | 2. Issuer Name and Ticker or Trading Symbol Cronos Group Inc. [CRON] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) General Manager (Israel) | | | | | | |
|--|---|--|--|--|---|---|------------|------------------------|--|---|--|--|---|--|----------------------------------|--|--|--|
| (Last) (First) (Middle) 111 PETER STREET, SUITE 300 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/15/2023 | | | | | | | | | | | | X | |
| (Street) TORONTO A6 M5V 2H1 | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applical X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | | | | | 1 | | | | |
| (City) | (State | e) (Z | ip) | | | Rule 10b5-1(c) Transaction Indication 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. | | | | | | | tisfy the | | | | | |
| | | Tak | le I - Nor | n-Deri | ivativ | e Se | curities | Acc | quired, [| Disp | osed of | f, or Ben | eficially (| Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Trans: Date (Month/L | | | | | | action 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed C | | ies Acquired (A) or Of (D) (Instr. 3, 4 and 5) | | 5. Amount Securities Beneficially Following Reported | | Form: | Direct I Indirect I tr. 4) | 7. Nature of ndirect Beneficial Ownership | | |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | Troppostio | | | | Instr. 4) | | |
| 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/Yea | Date, | 4. Transaction Code (Instr. 8) | | Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisabl | | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | | |
| RESTRICTED STOCK UNITS | \$0.0 ⁽¹⁾ | 03/15/2023 | | | A | | 100,502 | | (2) | | (2) | COMMON SHARES | 100,502 | \$0 | 184,9 | 005 | D | |

Explanation of Responses:

- $1.\ Each\ restricted\ stock\ unit\ ("RSU")\ represents\ a\ contingent\ right\ to\ receive\ one\ common\ share\ of\ Cronos\ Group\ Inc.$
- 2. The RSUs vest in three substantially equal annual installments beginning March 15, 2024, subject to continued employment through each applicable vesting date

Remarks:

/s/ Aaron Werner, as attorney-in-

fact for Ran Gorelik ** 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.