FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person*  SYKES OLLIN B					2. Issuer Name and Ticker or Trading Symbol CHARLES & COLVARD LTD [ CTHR ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner						
(Last)	(Fir	· ·	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/04/2020									Officer (give title Other (specify below) below)				
(Street) MORRISVILLE NC 27560					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting				
(City)	(Sta	ate) (	(Zip)												Perso	ori			
		Table	e I - No	n-Deriva	tive	Secu	rities	Acq	uired	, Dis	posed of	, or B	enefi	cially	y Own	ed			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea		Execution Date,		3. Transaction Code (Instr. 8)						5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code V A		Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)		, ,			
Common	Stock			12/04/2	020				P		30,820	A	\$1	23(2)	1,13	55,215	I	By Sykes & Company PA 401(k) Profit Sharing Plan UA Jan 01, 1985(1)	
Common	Stock			12/07/2	020				P		11,095	A	\$1	22(3)	1,14	6,310	I	By Sykes & Company PA 401(k) Profit Sharing Plan UA Jan 01, 1985(1)	
Common	Stock														135	5,000	I	By SEP IRA	
Common	Stock														92	,323	I	By ROTH IRA	
Common	Stock														100	0,000	Ι	By IRA	
Common Stock													45	,787	I	By spouse			
Common Stock													348	3,484	D				
		Та	ble II								osed of, c				Owned	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execu if any	3A. Deemed Execution Date, if any		4. Fransaction Code (Instr. 3)		mber rative rities sired r osed )		Exerc	cisable and	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price o Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct ( or Indir (I) (Inst	Beneficial Ownership ect (Instr. 4)	
			Code	v	(A) (D)		Date Exercisable		Expiration Date	Title	Amount or Number of Shares	er							

- 2. Represents a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$1.22 to \$1.23, inclusive. The reporting person undertakes to provide to Charles & Colvard, Ltd., any security holder of Charles & Colvard, Ltd., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in footnote (2) and (3) to this Form 4.
- 3. Represents a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$1.20 to \$1.22, inclusive.

/s/ Clint J. Pete, Attorney-In-Fact

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.