FORM 3

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB 32	235-		
Number: 0	104		
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

(Print or Type Responses)									
1. Name and Address of Reporting Person * SWANSON TODD V	Staten (Mont			3. Issuer Name and Ticker or Trading Symbol CLS Holdings USA, Inc. [NONE]					
(Last) (First) (Middl 10120 WEST FLAMINGO RD, SUITE 4333	e) 06/2/	7/2018			ssuer all applicable)	5. If Amendment, Date Original Filed(Month/Day/Year)			
(Street) LAS VEGAS, NV 89147					Director Officer (give title below) Other (specify below)			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))	Tal	ble I	- Non-Derivativ	ve Securitie	s Ben	eficially	Owned	
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	wnership orm: Direct (Instr. 5) or direct (I)			
Common Stock (1) 13,6			644,2	293	I See footnote (2)			(2)	
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02) 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 control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4)		ate Exercisable Expiration Date h/Day/Year)		tle and Amount of rities Underlying vative Security (1.4)	4. Conversio or Exercis Price of Derivative	Form o Derivat Securit	m of ivative urity:	(Instr. 5)	
	Exercisable	able Date	Title	Amount or Numb of Shares	er Security	or I	ect (D) ndirect tr. 5)		
Donouting Over and									

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SWANSON TODD V						
10120 WEST FLAMINGO RD		X				
SUITE 4333		Λ				
LAS VEGAS, NV 89147						

Signatures

/s/ Todd V. Swanson	10/04/2018
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) Owned by ILJ, LLC, a Nevada limited liability company of which the Reporting Person is the sole manager and member.

 The Common Stock was issued to the Reporting Person pursuant to the provisions of that certain Membership Interest Purchase
- (2) Agreement by and between the Issuer and Alternative Solutions, LLC (d/b/a Oasis Medical Cannabis) dated December 4, 2017 of which the Reporting Person was a Manager and an indirect member pursuant to his ownership in ILJ, LLC.

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.