FORM	4
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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).

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

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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

(Print or Type Responses)		•								
1. Name and Address of Reporting SWANSON TODD V	2. Issuer Name and Ticker or Trading Symbol CLS Holdings USA, Inc. [CLSH]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner			
(Last) (First) 10120 WEST FLAMINGO	(Middle) RD, SUITE 4333	3. Date of Earliest 01/12/2021	3. Date of Earliest Transaction (Month/Day/Year) 01/12/2021					Officer (give title below)	Other (specify l	below)
(Street) LAS VEGAS, NV 89147	4. If Amendment, Date Original Filed(Month/Day/Year)					ar)	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)	Ta	able I - No	n-De	erivative S	Securit	ies Acqui	red, Disposed of, or Beneficially	Owned	
1.Title of Security (Instr. 3)	Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	v	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price		5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	01/12/2021		S		40,000	D	\$ 0.1765	13,343,892 <u>(1)</u>	Ι	See footnote

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

Persons who respond to the collection of information

SEC 1474 (9-02)

contained in 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

IC II - L	/ciiiauiii	becui	nics negu	meu, Di	sposed of	, or being	includy	0
(4	g. g., nuts.	calls, y	warrants.	ontions.	converti	ble secur	ities)	

-		-	(0.8.)	Juis, cans	, ,,	411411	.s, op	uons, conver	tible securi	(inco)					
1. Title	e of 2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Deriva	tive Conversio	n Date	Execution Date, if	Transact	ion	Numl	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Securi	ty or Exercis	e (Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr.	3) Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur				(Instr	. 3 and			~	(Instr. 4)
	Security					Acqu	ired			4)			0	Direct (D)	
						(A) 0							1	or Indirect	
						Dispo							Transaction(s)	× /	
						of (D	<i>'</i>						(Instr. 4)	(Instr. 4)	
						(Instr	· · · ·								
						4, and	15)				-				
											Amount				
								Date	Expiration		or				
								Exercisable	*	Title	Number				
								Excicisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

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

Signatures

/s/ Todd V. Swanson	01/14/2021
**Signature of Reporting Person	Date
/s/ ILJ, LLC by /s/ Todd V. Swanson, Manager	01/14/2021

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) ILJ, LLC, a Nevada limited liability company of which the Reporting Person is the sole manager and member.

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.