## FORM 4

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

OMB APPROVAL
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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).

#### 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 Ty	pe Response	s)												
Name and Address of Reporting Person   LoCascio Aaron			2. Issuer Name and Ticker or Trading Symbol Greenlane Holdings, Inc. [GNLN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director  X_ 10% Owner					
(Last) (First) (Middle) C/O GREENLANE HOLDINGS, INC., 1095 BROKEN SOUND PARKWAY, SUITE 300			3. Date of Earliest Transaction (Month/Day/Year) 11/13/2020					X_Office	er (give title bel Chie	ow) f Executive	Other (specify b	pelow)		
(Street) BOCA RATON, FL 33487				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City)	)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye		Date	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)						Ownership Form:	7. Nature of Indirect Beneficial Ownership	
				Code	· V	Amoun	(A) or t (D)	Price	(msu. 5 a	.u. 1)		or Indirect (I) (Instr. 4)	(Instr. 4)	
Class A C	Common S	Stock	11/13/2020		S		40,700	D	\$ 2.74 (1)	65,875			D	
Reminder:	Report on a s	separate line fo		Derivative Securit	ies Acqu	Pers con the	sons whatained in form dis	no responding this for this for Beauty of, or Beauty	orm are a curre eneficial	not requesting ntly valid		formation spond unle trol numbe	ss	1474 (9-02)
1. Title of	2.	3. Transaction		4.	5.		ate Exer		<del></del>	itle and	8. Price of	9. Number	of 10.	11. Nature
Derivative Security	Conversion or Exercise Price of Derivative Security	Date (Month/Day/	Execution D any	te, if Transaction Code Year) (Instr. 8)	Number an		Expiration Date onth/Day/Year)		Amo Und Secu	ount of derlying urities tr. 3 and	Derivative Security (Instr. 5)		Owners Form of Derivati Security Direct ( or Indire	hip of Indirect Beneficial Ownershi (Instr. 4)
				Code V	(A) (I		-	Expirati Date	Title	Amount or Number of Shares				

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LoCascio Aaron C/O GREENLANE HOLDINGS, INC. 1095 BROKEN SOUND PARKWAY, SUITE 300 BOCA RATON, FL 33487	X	X	Chief Executive Officer				

#### **Signatures**

/s/ Douglas Fischer, as attorney-in-fact for Aaron LoCascio	11/16/2020
**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).

The Reporting Person sold the shares pursuant to a plan of disposition adopted in accordance with Rule 10b5-1 of the Securities Exchange Act of 1934. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$2.665 to \$2.89, inclusive. The Reporting Person undertakes to provide to Greenlane Holdings, Inc., any security holder of Greenlane Holdings, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in footnote (1) to this Form 4.

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.