FORM 4

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

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).

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				
(Last) (First) (Middle) C/O GREENLANE HOLDINGS, INC., 1095 BROKEN SOUND PARKWAY, SUITE 300				3. Date of Earliest Transaction (Month/Day/Year) 01/27/2021					X Officer (give title below) Other (specify below) Chief Executive Officer					
(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)	T	able I -	Non-De	rivative	Securition	es Acqu	ired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)		4. Securities Acqu (A) or Disposed or (Instr. 3, 4 and 5)		of (D)	Beneficia	nt of Securities ally Owned Following I Transaction(s) and 4)		Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
					Cod	e V	Amoun	nt (D)	Price				(Instr. 4)	
Class A Common Stock 01/27/2021			01/27/2021		S		44,40	0 D	\$ 4.35 (1)	110,775		D		
Reminder:	Report on a s	separate line to		Derivative Securit	ies Acq	Per cor the uired, I	sons whatained in form disposed	no responding this for splays and of, or Be	orm are a curre eneficial	e not requently valid	OMB con	formation spond unle trol numbe	ess	1474 (9-02)
1. Title of	2	3. Transactio		(e.g., puts, calls, w	arrants 5.		s, conver Date Exer			itle and	8 Price of	9. Number	of 10.	11. Natur
	Conversion or Exercise Price of Derivative Security	Date	Execution Da Year) any	rte, if Code Year) (Instr. 8)	Number and		Expiration Date nnth/Day/Year)		Am Und Sec	ount of derlying urities tr. 3 and	Derivative Security		Owners Form of Derivat Security Direct (or Indir	of Indirect Beneficia Ownershi (Instr. 4)
				Code V	(A) (Da Exc	te ercisable	Expirati Date	Title	Amount or e 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	01/29/2021
**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 \$4.08 to \$4.70, 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.