FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	<b>OF CHANGI</b>	ES IN BENE	FICIAL O	WNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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Name and Address of Reporting Person*     Dopp Rebekah				2. Issuer Name and Ticker or Trading Symbol Tilray, Inc. [ TLRY ]  5. Relationship of Reporting Person(s) to Issuer (Check all applicable)															
<u> 1 1 4400 T</u>	<u>Kebekan</u>					J.,			-					7	Compared to the compared to	or		10% O	vner
(Last) (First) (Middle) 1100 MAUGHAN ROAD				3. Date of Earliest Transaction (Month/Day/Year) 03/01/2021								Officer below)	(give title		Other (sbelow)	specify			
1100 MAUGHAN KUAD				4 16	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Appl								nlicable						
(Street)	MO A	1	V9X IJ2		4. "	AIIICI	iumei	ii, Dale C	or Original	riicu	(WOTHIND	ayr rear)		Line	)	·		orting Perso	·
			V 571 10 <b>2</b>		.										Form f Persor		e thar	n One Repo	rting
(City)	(S	tate)	(Zip)												r ei sui	'			
		Tab	le I - Non	-Deriv	ative	Sec	curiti	ies Ac	quired,	Dis	posed o	of, or B	ene	ficiall	y Owned	t			
Dat			2. Trans Date (Month/l	Exe Day/Year)   if ar		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Of (D Code (Instr. 5)		ities Acqu d Of (D) (I	ies Acquired (A) or Of (D) (Instr. 3, 4 and		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	Amount	(A) (D)	or	Price	Transaci (Instr. 3	ction(s)			(111501.4)
Class 2 Common Stock 03/01				1/202	/2021		M		2,18	187 A		(1)	22	22,683		D			
		Т	able II - I (								osed of onverti				Owned				
1. Title of Derivative Security (Instr. 3)  2. Conversio or Exercis Price of Derivative Security		e (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Date,	4. Transaction Code (Instr 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisab		expiration Date	Title	or Nu of	nount imber iares					
Restricted Stock	(2)	03/01/2021			M			2,187	03/01/202	1	(3)	Class 2 Common	2,	,187	\$0.00	10,938	3	D	

## **Explanation of Responses:**

- 1. Each restricted stock unit ("RSU") converted into one share of Class 2 Common Stock.
- $2. \ Each \ RSU \ represents \ a \ contingent \ right \ to \ receive \ one \ share \ of \ the \ Issuer's \ Class \ 2 \ Common \ Stock.$
- 3. The RSUs shall vest at the rate of 25% of the RSUs on the twelve (12) month anniversary of June 1, 2018 (the "Vesting Date"), and the remaining RSUs will vest quarterly thereafter at the rate of 6.25% of the total number of RSUs on each quarterly anniversary of the Vesting Date thereafter for so long as the Reporting Person remains in Continuous Service (as defined in the Issuer's 2018 Equity Incentive Plan), such that the total number of RSUs shall be fully vested on the four-year anniversary of the Vesting Date.

## Remarks:

/s/ Julia Stark, Attorney-in-fact 03/03/2021

\*\* Signature of Reporting Person Date

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

- \* 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.