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).

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

| Name and Address of Reporting Person*                                                                                                        |                                                                                  |            |              | 2. Issuer Name and Ticker or Trading Symbol Tilray, Inc. [ TLRY ] |                                                          |         |                                                                |                  |                                                                                               |                              | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                                                                          |                                                                    |              |   |
|----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|------------|--------------|-------------------------------------------------------------------|----------------------------------------------------------|---------|----------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|--------------|---|
| SIMON IRWIN D                                                                                                                                |                                                                                  |            |              | -                                                                 | integy, inc. [ IBIX1 ]                                   |         |                                                                |                  |                                                                                               |                              | :                                                                       | X Directo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 10% O       |                                                                          | 10% Ow                                                             | ner          |   |
| (Last)                                                                                                                                       | (Last) (First) (Middle)                                                          |            |              |                                                                   | Date of Earliest Transaction (Month/Day/Year)            |         |                                                                |                  |                                                                                               |                              |                                                                         | Constitution of Market | (give title |                                                                          | Other (s<br>below)                                                 | pecify       |   |
| C/O TILRAY, INC.                                                                                                                             |                                                                                  |            |              | 0                                                                 | 07/27/2021                                               |         |                                                                |                  |                                                                                               |                              |                                                                         | President and CEO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                                                                          |                                                                    |              |   |
| 655 MADISON AVENUE, 19TH FLOOR                                                                                                               |                                                                                  |            |              |                                                                   |                                                          |         |                                                                |                  |                                                                                               |                              |                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                                                                          |                                                                    |              |   |
| ,                                                                                                                                            |                                                                                  |            |              | 4                                                                 | 4. If Amendment, Date of Original Filed (Month/Day/Year) |         |                                                                |                  |                                                                                               |                              |                                                                         | 6. Individual or Joint/Group Filing (Check Applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |             |                                                                          |                                                                    |              |   |
| (Street)                                                                                                                                     |                                                                                  |            |              |                                                                   |                                                          |         |                                                                |                  |                                                                                               |                              |                                                                         | Line                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ,           | led by One                                                               | Dono                                                               | rting Person |   |
| NEW YO                                                                                                                                       | ORK N                                                                            | Y          | 10065        |                                                                   |                                                          |         |                                                                |                  |                                                                                               |                              |                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | _           | ,                                                                        | •                                                                  | One Report   |   |
| (2)                                                                                                                                          |                                                                                  |            | <b></b>      |                                                                   |                                                          |         |                                                                |                  |                                                                                               |                              |                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Person      |                                                                          |                                                                    |              | 9 |
| (City)                                                                                                                                       | (S                                                                               | tate)      | (Zip)        |                                                                   |                                                          |         |                                                                |                  |                                                                                               |                              |                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                                                                          |                                                                    |              |   |
|                                                                                                                                              | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |            |              |                                                                   |                                                          |         |                                                                |                  |                                                                                               |                              |                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                                                                          |                                                                    |              |   |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D                                                                                     |                                                                                  |            |              |                                                                   | Execution Date,                                          |         | Code (Instr.                                                   |                  | ties Acquir<br>d Of (D) (Ins                                                                  | ed (A) or<br>str. 3, 4 and ! | Beneficia<br>Owned Fe                                                   | s<br>lly<br>ollowing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Form:       | Direct I<br>Indirect E<br>str. 4)                                        | '. Nature of<br>ndirect<br>Beneficial<br>Ownership                 |              |   |
|                                                                                                                                              |                                                                                  |            |              |                                                                   |                                                          |         | Code                                                           | v                | Amount                                                                                        | (A) o<br>(D)                 | Price                                                                   | Reported<br>Transacti<br>(Instr. 3 a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |             |                                                                          |                                                                    | nstr. 4)     |   |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |                                                                                  |            |              |                                                                   |                                                          |         |                                                                |                  |                                                                                               |                              |                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                                                                          |                                                                    |              |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                                                                                          | erivative Conversion Date Execution Date (Month/Day/Year) if any                 |            | Code (Instr. |                                                                   | Derivative                                               |         | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                  | 7. Title and Amount<br>of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                              | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)                     | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |              |   |
|                                                                                                                                              |                                                                                  |            |              | Code                                                              | v                                                        | (A)     | (D)                                                            | Date<br>Exercisa | able                                                                                          | Expiration<br>Date           | Title                                                                   | Amount<br>or<br>Number<br>of Shares                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |             | (Instr. 4)                                                               | лі(5)                                                              |              |   |
| Restricted<br>Stock<br>Units                                                                                                                 | (1)                                                                              | 07/27/2021 |              | A                                                                 |                                                          | 189,781 |                                                                | (2)              |                                                                                               | (2)                          | Class 2<br>Common<br>Stock                                              | 189,781                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | \$0         | 189,78                                                                   | 1                                                                  | D            |   |

## Explanation of Responses:

- $1. \ Each \ restricted stock \ unit \ ("RSU") \ represents \ a \ contingent \ right \ to \ receive \ one \ (1) \ share \ of \ Tilray, \ Inc. \ Class \ 2 \ Common \ Stock.$
- 2. Subject to the reporting person's continuous employment through the vesting date, except in certain circumstances, the RSUs shall vest 50% on the first (1st) anniversary of the grant date and 50% on the second (2nd) anniversary of the grant date, except in the case of the reporting person's earlier involuntary termination, death or disability. In the event of a voluntary termination by the reporting person prior to the vesting date, all RSUs will be forfeited.

/s/ Carl A. Merton, as Attorneyin-Fact for Irwin D. Simon

\*\* 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.