FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average b	urden							
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

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1. Name and Address of Reporting Person*  Jacobovitz Shalom				2. Issuer Name and Ticker or Trading Symbol Clene Inc. [ CLNN ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Jacobovitz Shaloili			[									X Directo	or		10% Ow	/ner		
(Last) 6550 SO	(Last) (First) (Middle) 5550 SOUTH MILLROCK DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 05/18/2021								Officer below)	(give title		Other (s below)	pecify	
SUITE G50																		
(Street) SALT LA	AKE U	Т	84121		4. If Amendment, Date of Original Filed (Month/Day/Year) 05/18/2021						Lin	ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			Execution Date,		Code (Ir					Beneficia	es Forn ally (D) o Following (I) (Ir		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3	ction(s)			(Instr. 4)
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		ate, Ti	ransaction of Code (Instr. Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)			ies g Security	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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				c	ode	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares					
Stock Options (Right to buy)	\$9.1 <sup>(1)</sup>	05/18/2021			A		2,418		(2)	0	5/18/2031	Common Stock	2,418	\$0.00	2,418		D	
Stock Options (Right to buy)	\$9.1 <sup>(3)</sup>	05/18/2021			A		30,000		(4)	0	5/18/2031	Common Stock	30,000	\$0.00	30,000	)	D	

## **Explanation of Responses:**

- 1. This Form 4 amendment is being filed to correct a Form 4 filed on May 18, 2021. The corrected exercise price is \$9.10 and the corrected number of options granted is 2,418.
- 2. This option was granted on May18, 2021 as an option for 2,418 shares of Common Stock under the Clene Inc. 2020 Stock Plan at an exercise price of \$9.10 per share. The options vest immediately upon
- 3. This Form 4 amendment is being filed to correct a Form 4 filed on May 18, 2021 to reflect a correction in the exercise price related to the grant of an option for 30,000 shares of common stock of Clene Inc.
- 4. This option was granted on May18, 2021 as an option for 30,000 shares of Common Stock under the Clene Inc. 2020 Stock Plan at an exercise price of \$9.10 per share. The options vest in 12 equal installments of Common Stock on the 18th day of each calendar month, beginning June 18, 2021, until such shares are fully vested.

## Remarks:

/s/ Jerry Miraglia POA

05/25/2021

\*\* 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.