FORM 4

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

OMB APPRO	VAL
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).

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

1. Name and															
1. Name and Address of Reporting Person* HENNING MICHAEL A				2. Issuer Name and Ticker or Trading Symbol Clarus Corp [CLAR]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director 10% Owner				
(Last) (First) (Middle) C/O CLARUS CORPORATION, 2084 EAST 3900 SOUTH				3. Date of Earliest Transaction (Month/Day/Year) 05/19/2020						-	Officer (give	e title below)		er (specify belo	w)
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
SALT LA		(State)	(Zip)				N D	•				e D			
		,,	2. Transaction	las D				1			ed, Disposed				7 N .
(Instr. 3)		Date (Month/Day/Year) any	on Date, if	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Benefici Owned Following Reported Transaction(s)		ed	Ownership Form:	7. Nature of Indirect Beneficial	
				(Month/Day/Ye		Cod	e V	Amount	(A) or (D)	Price	Instr. 3 and 4))		· /	Ownership (Instr. 4)
	Stock, par ("Common	value \$0.0001 Stock")	05/19/2020			М		20,000	A	\$ 6.85	30,000			D	
								form a	re not re	equired t	collection of to respond	unless the		520	1474 (9-02)
			Table II -		ve Securiti		displa	s form a nys a cu posed of,	re not re rrently v	equired to valid OM eficially O	to respond IB control n	unless the		5. 525	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	5. Nu tion of De Secur Acqui	mber rivative ities red (A) sposed	displanted, Displanted, Displanted G. Date E. Expiration	s form and anys a cumposed of, convertibely	or Bene e and	equired to valid OM eficially O ities)	to respond of the control not be control not control n	unless the umber. 8. Price of		f 10. Ownersl Form of Derivati Security Direct (l or Indire	11. Naturof Indire Benefici Ownersk (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if	4. Transac Code	5. Nu tion of De Secur Acqu or Dis of (D) (Instr	mber rivative ities rred (A) posed	displanted, Displanted, Displanted G. Date E. Expiration	posed of, posed of, convertib exercisable in Date Day/Year	or Bene e and	equired to valid OM eficially O ities) 7. Title a of Under Securities	to respond of the control not be control not control n	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	f 10. Ownersl Form of Derivati Security Direct (l or Indire	11. Natur of Indire Benefici Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
HENNING MICHAEL A C/O CLARUS CORPORATION 2084 EAST 3900 SOUTH SALT LAKE CITY, UT 84124	X					

Signatures

/s/ Michael A. Henning	05/21/2020
**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).

(1) Immediately exercisable options to purchase 20,000 shares of the Issuer's common stock were granted under the Issuer's 2005 Stock Incentive Plan on 5/28/2010.

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.