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 Type Responses) 1. Name and Address of Reporting Person * Hill John P			2. Issuer Name and Ticker or Trading Symbol Clearfield, Inc. [CLFD]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 7050 WINNETKA AVE. N., SUITE 100			3. Date of Earliest Transaction (Month/Day/Year) 11/16/2020					X Officer (give title below) Other (specify below) Chief Operating Officer				elow)		
(Street) BROOKLYN PARK, MN 55428			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				le Line)		
(City)		(State)	(Zip)	Ta	ıble I - Nor	1-Der	ivative :	Securities .	Acqui	ired, Dispo	osed of, or I	Beneficially C	wned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Code (Instr. 8)		4. Securities Acquire (A) or Disposed of ((Instr. 3, 4 and 5)			Beneficial Reported	nt of Securities ally Owned Following I Transaction(s)		6. Ownership Form:	Beneficial
				(Month/Day/Year)	Code	V	Amour	(A) or (D)	Price	(Instr. 3 a	or Inc (I)		or Indirect	Ownership (Instr. 4)
Common	Stock		11/16/2020		S		10,00		\$ 24	206,065)	
										lly Owned				
1. Title of Derivative Conversion Security or Exercise (Month/Day/Year) 3A. Deemed Execution Day			e.g., puts, calls, wa 4. te, if Transaction Code Year) (Instr. 8)	and Expiration Date (Month/Day/Year) Am Und Sec			7. Tanda Secu	itle and bount of erlying urities tr. 3 and S. Price of 9. Derivative D. Security S. (Instr. 5) B. R.			f 10. Ownersh Form of Derivati' Security Direct (I or Indire	Benefici Ownersh (Instr. 4)		
					Disposed of (D) (Instr. 3, 4, and 5)						(Instr. 4)	(Instr. 4)		
				Code V	(A) (D)	Date Exer	e rcisable	Expiration Date	Title	Amount or Number of Shares				
					() ()									

		Relationships						
Reporting Own	Reporting Owner Name / Address		10% Owner	Officer	Other			
Hill John P 7050 WINNET SUITE 100 BROOKLYN P	KA AVE. N. PARK, MN 55428			Chief Operating Officer				

Signatures

Taylor Keup by Power of Attorney for John P. Hill	11/18/2020	
**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).

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.