FORM 4

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

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).

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 Ty	pe Response	s)															
1. Name and Address of Reporting Person* Strain John					2. Issuer Name and Ticker or Trading Symbol Leslie's, Inc. [LESL]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 2005 EAST INDIAN SCHOOL ROAD					3. Date of Earliest Transaction (Month/Day/Year) 06/14/2021								Office	r (give title belo	ow)	Other (specify	pelow)
(Street)				4. If	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						
PHOENI	X, AZ 850	016															
(City)	(State)	(Zip)			Ta	ble I	- Non	ı-Der	ivative	Securities	Acqu	ired, Disp	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)		etion	(A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficially Owned Followi Reported Transaction(s)		Following	Form:	7. Nature of Indirect Beneficial
			(Moi				ode	V	Amoun	(A) or (D)	Price	(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common Stock, par value \$0.001 per share		06/14/2021					S		12,09:	5 D	\$ 26.81	38,937		D			
			Table II					quire	the f	form dis	splays a of, or Ben	curre reficial		OMB conf	spond unle trol numbe		
1 77:1 0	l.	2.77	la. 5					ts, op			tible secu		*.1 1	0 D : C	0.37 1	6 10	1,1, 3,7,
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transactio Date (Month/Day/	Year) Execution I	Date, if	e, if Transaction Code (ear) (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		and i	6. Date Exercisable and Expiration Date (Month/Day/Year)		Ame Und Secu	itle and ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form o Derivat Securit Direct (or India	Beneficial Ownershi (Instr. 4) D) ect
					Code	V	(A)	(D)	Date Exer	e rcisable	Expiration Date	n Title	Amount or Number of Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Strain John 2005 EAST INDIAN SCHOOL ROAD PHOENIX, AZ 85016	X						

Signatures

/s/ Brad A. Gazaway, as Attorney-in-Fact for John Strain	06/15/2021	
**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.