FORM 4

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

OMB APPROVAL
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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)																		
Name and Address of Reporting Person * Niihara Yutaka					2. Issuer Name and Ticker or Trading Symbol Emmaus Life Sciences, Inc. [EMMA]								5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) (First) (Middle) 21250 HAWTHORNE BLVD., SUITE 800				3. D	3. Date of Earliest Transaction (Month/Day/Year) 09/21/2021								X DirectorX 10% Owner X Officer (give title below) Other (specify below) Chairman and CEO							
(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					Line)	
TORRANCE, CA 90503						F										Form filed by More than One Reporting Person				
(City) (State) (Zip)						Table I - Non-Derivative Securities Acqui								<u> </u>						
(Instr. 3)		Date (Month/Day/Year) E		Execut	A. Deemed Execution Date, if any Month/Day/Year)		Code			(A) or Disposed of (D) (Instr. 3, 4 and 5)) Ber Rej	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D) or Indirect	hip Indirect Benefic Owner	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	ī	7	Amount	mount (A) or (D) Price				(I) (Instr. 4		(msu. 4)		
Common value	stock, \$0.	001 par	09/21	/2021				P			2,000	A	\$ 1.64 (1)	10	,877,065	5		D (2)		
Common value	stock, \$0.	001 par	09/22	/2021				P			1,582	A	\$ 1.73	10	,878,647	7		D (2)		
Common stock, \$0.001 par value													92	,794	I		Intern	By Hope International Hospice, Inc. (3)		
Common stock, \$0.001 par value													63	,000			I	I By Soomi Niihara		
Reminder:	Report on a s	separate line	for each				•			Pe co the	rsons w ntained e form d	ho re in thi	s form	n are urren	not requ	ction of inf ired to res OMB cont	pond	unless	SEC 14	74 (9-02)
		1		1 abic 11						-	ns, conve				y Owned					
Derivative Conversion		(Month/Day/Year) any		Date, if	4. Transaction Code Year) (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		ate r)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		(Instr.		ative Over ties For icially Described See wing or action(s)	Security: Direct (D) or Indirect	11. Nature of Indirec Beneficial Ownership (Instr. 4)		
						Code	v	(A)			ate xercisable		ration	Title	Amount or Number of Shares					

Reporting Owners

		R	elationships	
	Director	10% Owner	Officer	Other
Reporting Owner Name / Address				

Niihara Yutaka 21250 HAWTHORNE BLVD. SUITE 800 TORRANCE, CA 90503	X	X	Chairman and CEO		
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Signatures

Yutaka Niihara, M.D., M.P.H.	09/23/2021
**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).
- The price reported is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$1.62 to \$1.73, inclusive. The reporting person (1) undertakes to provide to Emmaus Life Sciences, Inc., any security holder of Emmaus Life Sciences, Inc., and the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote (1).
- (2) The shares shown include shares owned jointly with Soomi Niihara, the reporting person's wife.
- (3) Hope International Hospice, Inc, is a California corporation of which Dr. Niihara and his wife are the sole shareholders and directors.

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.