

(Print or Type Responses)

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

OMB APPROVAL					
OMB Number:	3235-0104				
Estimated average burden					
nours per response					

INITIAL STATEMENT OF 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

3. Issuer Name and Ticker or Trading Symbol

2. Date of Event Requiring

Name and Address of Reporting Person* Wood Jane Pine			2. Date of Event Requiring Statement (Month/Day/Year) 03/25/2020			3. Issuer Name and Ticker or Trading Symbol Emmaus Life Sciences, Inc. [EMMA]						
(Last) 21250 HAWTHO 800	(First) ORNE BLVD	(Middle) ., SUITE	03/23/2	.020		Issuer (Chec	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director _Officer (give title below) _Other (specify below)			5. If Amendment, Date Original Filed(Month/Day/Year)		
TORRANCE, CA	(Street) A 90503					Officer (give				6. Individual or Joint/Group Filing(Check Applicable Line)X_Form filed by One Reporting PersonForm filed by More than One Reporting Person		
(City)	(State)	(Zip)		Table I - Non-Derivative Securities Beneficially Owned						wned		
1.Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)				Fo (D (I)	orm: Direct O) or Indirect	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02 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 control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)		2. and	. Date Exercisable nd Expiration Date Month/Day/Year)		3. Titl	e and Amount of ities Underlying Derivat	ive	4. Conversion	5. Ow Form Deriv	nership of	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		Da Ex	nte ercisable	Expiration Date	Title	Amount or Number of Shares		Security	(D) or (I) (Instr.	Indirect (5)		
Donorting (Ovvinons											

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Wood Jane Pine 21250 HAWTHORNE BLVD. SUITE 800 TORRANCE, CA 90503	X					

Signatures

Jane Pine Wood	04/24/2020
**Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- If the form is filed by more than one reporting person, see Instruction 5(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).

Remarks:

No securities are beneficially owned.

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.