

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

OMB APPROVAL				
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nours per respons	se 0.5			

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

(Print or Type Responses)								
1. Name and Address of Reporting Person* Marrone Pamela G	2. Date of Event Requiring Statement (Month/Day/Year) 07/02/2021			3. Issuer Name and Ticker or Trading Symbol 180 Life Sciences Corp. [ATNF]				
(Last) (First) (Middle) 3000 EL CAMINO REAL BLDG. 4, SUITE 200	0770272	4. Relations Issuer			1 1 0 1/		5. If Amendment, Date Original Filed(Month/Day/Year)	
PALO ALTO, CA 94306				Officer (give title Delow) Officer (give title Delow) Officer (give title Delow)		Applicable I _X_ Form fi	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _ Form filed by More than One Reporting Person	
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned						
1. Title of Security (Instr. 4)	2. Amount of Securi Beneficially Owned (Instr. 4)		wned	*	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock 0			D					
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. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Securities U Security (Instr. 4)	Amount of Inderlying Derivativ	Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Exercisable	Expiration Date	Title Amou	unt or Number of	Security	(D) or Indirect (I) (Instr. 5)		

Reporting Owners

	Relationships				
Reporting Owner Name / Address		10% Owner	Officer	Other	
Marrone Pamela G 3000 EL CAMINO REAL BLDG. 4, SUITE 200 PALO ALTO, CA 94306	X				

Signatures

/s/ Pamela Marrone	07/07/2021
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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:

Effective on July 2, 2021, the Reporting Person was appointed as a Director of the Issuer.

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.