## FORM 4

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

OMB APPROVAL
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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 Type Responses)  1. Name and Address of Reporting Person*  Berecz Elizabeth				2. Issuer Name and Ticker or Trading Symbol Nemus Bioscience, Inc. [NMUS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director  10% Owner				
(Last) (First) (Middle) 650 TOWN CENTER DRIVE, SUITE 1770				3. Date of Earliest Transaction (Month/Day/Year) 10/20/2015						X Officer (give title below) Other (specify below)  Chief Financial Officer				
(Street) COSTA MESA, CA 92626				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				
	(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu						ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	(A	4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)			Beneficial Reported	lly Owned F Transaction	of Securities y Owned Following ransaction(s)		7. Nature of Indirect Beneficial
				(Month/Day/Year)	Code	V A	mount	(A) or (D)	Price	(Instr. 3 a	0 (1			Ownership (Instr. 4)
Common	Stock (1)		10/20/2015		A	35 (I)	0,000	A S	\$ 0	350,000	1		D	
				Derivative Securiti	ies Acquire	contair the form ed, Dispo	ed in the display	nis form ays a c or Bene	m are curren	not requ tly valid		ormation spond unle rol numbe	ss	1474 (9-02)
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Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Da	(e.g., puts, calls, wa 4. tte, if Transaction Code Year) (Instr. 8)	ies Acquires arrants, op 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	contair the form d, Disposions, co 6. Date and Exp	ed in the display	nis formays a coor Benebe securion ble Date	eficially ities) 7. Tit Amore Unde	not required the and unt of brlying	ired to res	spond unle	of 10. Owners Form of Derivati Security Direct ( or Indire	11. Nation of Indir Benefic Owners (Instr. 4
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Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative	Date (Month/Day/Y	3A. Deemed Execution Da	(e.g., puts, calls, wa 4. Transaction Code Year) (Instr. 8)	ies Acquires for arrants, op 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	contair the form d, Dispetions, co 6. Date and Exp (Month	ed in the displayed of the displayed of the neutron	or Bene e securible Date ar)	rn are curren  eficially ities)  7. Tit Amou Unde Secur (Instr 4)	not requitly valid  y Owned  tle and unt of orlying rities . 3 and  Amount or Number of	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners Form of Derivati Security Direct ( or Indirects)	11. Nation of Indir Benefic Owners (Instr. 4

### **Signatures**

Berecz Elizabeth

**SUITE 1770** 

650 TOWN CENTER DRIVE

COSTA MESA, CA 92626

Elizabeth Berecz	10/22/2015
**Signature of Reporting Person	Date

Owner

Chief Financial Officer

## **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).
- (1) Restricted Stock Award issued pursuant to the terms and conditions of the Company's 2014 Omnibus Incentive Plan and is subject to three year cliff vesting on October 20, 2018.

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.