## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

	pe Responses	3)														
Name and Address of Reporting Person *     Psomiadis Themistocles					2. Issuer Name and Ticker or Trading Symbol Marijuana Co of America, Inc. [MCOA]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X_Director  10% Owner					
1420 MIDTOWN AVE, APT 407 (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 07/21/2020						X Officer (give title below) Other (specify below) Vice President					
(Street) MOUNT PLEASANT, SC 29464				4. If	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 Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea		any	on Date, if	3.		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)					6. Ownership Form:	7. Nature of Indirect Beneficial Ownership	
								V	Amount	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
			07/21/2020						10,000,000	00 A	\$ 0.0003	0.0003	00,000		D	
						Denomorally	owned		y or indirectl	no respo						1474 (9-02)
				Table I	I - Deriv	ative Secu	rities Ac	quire	Persons when the contained in the form distributed by the form distributed by the contact of the	no responding this for splays a	m are current	not requ tly valid	uired to res OMB con	spond unle	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transac Date (Month/D		3A. Deem Execution	I - Deriv (e.g., ) ed Date, if	ative Secu puts, calls, 4. Transaction	rities Ac warran 5.	quire ts, opto er ative ities ired f ssed	Persons whe	no responding this for splays a sof, or Bentible securisable on Date	eficially rities) 7. Titi Amou	not requ tly valid y Owned le and ant of rlying	OMB conf	spond unle	of 10. Ownersl Form of Derivati Security Direct (l or Indire	11. Natur of Indire Beneficia ve (Unstr. 4)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Psomiadis Themistocles 1420 MIDTOWN AVE APT 407 MOUNT PLEASANT, SC 29464	X		Vice President			

### **Signatures**

/s/ Themistocles Psomiadis	07/31/2020		
**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.