FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPR	OVAL						
OMB Number:	3235- 0104						
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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

1. Name and Address of Reporting Person* Rice Michael Yehuda			2. Date of E Requiring S (Month/Day 03/05/202	Statement //Year)	3. Issuer Name and Ticker or Trading Symbol LifeSci Acquisition Corp. [LSAC]						
(Last) (First) (Middle) C/O LIFESCI ACQUISITION CORP.				4. Relationship of Reporting Issuer (Check all applicable) X Director X Officer (give	10% Owner Other (specify		5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line)				
250 W. 55TH ST., #3401		_									
(Street) NEW YORK	NY	10019	_		Chief Operatin	below) g Officer		X	Person	by One Reporting by More than One Person	
(City)	(State)	(Zip)									
		Tá	able I - Non	-Derivati	ve Securities Benefi	cially O	wned				
1. Title of Security (Instr. 4)								4. Nature of Indirect Beneficial Ownership (Instr. 5)			
1. Title of Se	ecurity (Instr. 4	4)		E	2. Amount of Securities Beneficially Owned (Instr. I)	3. Owner Form: [(D) or II(I) (Inst	Direct ndirect				
1. Title of Se		4)		E	Beneficially Owned (Instr.	Form: [(D) or li	Direct ndirect	Own	ership (Instr.		
				Derivative	Beneficially Owned (Instr. 1)	Form: I (D) or II (I) (Inst	Direct Indirect r. 5)	By v LLC	ership (Instr.	5)	
Common S		(e.g		Derivative ls, warrar	Securities Beneficial	Form: I (D) or li (I) (Insti	Direct Indirect r. 5)	By v LLC	ership (Instr.	5)	

Explanation of Responses:

1. Mr. Rice is a managing member of LifeSci Investments, LLC. He disclaims any pecuniary interest in the securities except to the extent of his ownership interest in LifeSci Investments, LLC.

/s/ Michael Rice

03/05/2020

** Signature of Reporting

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.