SEC For																			
	FORM	UNITED STATES SECURITIES AND EXCHANGE COMMISSIC Washington, D.C. 20549																	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).					_		_	-		ENEFIC	_	HIP	Estim	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5					
matuc				Filed p	or Sec	tion 3	0(h) of the	e Inves	stment (Company Ac	t of 1940	1 1934	•		<u>. </u>				
1. Name and Address of Reporting Person [*] CONTE LISA A					2. Issuer Name and Ticker or Trading Symbol Jaguar Health, Inc. [JAGX]									ck all applica	able)	g Pers	on(s) to Issu 10% Ov	vner	
	(F JUAR HEA E STREET,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/27/2022								_ X	below)	Officer (give title elow) CEO and Pre		Other (specify below) esident			
(Street) SAN FRANCISCO CA			94104	4	4. If Amendment, Date of				of Original Filed (Month/Day/Year)				Line)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				1	
(City) (State) (Zip)																			
		Та	ble I - Non-	Derivati	ive Se	ecur	ities Ac	cquir	red, D	isposed	of, or B	enet	ficially	Owned					
Date				2. Transacti Date Month/Day	Execution Date			Code (Instr.		on Dispos	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4					Form	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
								c	ode V	Amoun	t (A) (D)	or	Price	Transaction				(Instr. 4)	
			Table II - D (e	erivativ .g., put	e Sec s, cal	curit Is, v	ies Acc varrants	quire s, op	d, Dis tions	posed o , convert	f, or Be ible see	nefic curiti	cially (ies)	Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Ye	Code	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ate Exerc ration D nth/Day/Y		7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie Beneficia Owned Following Reported Transact	ative rities ficially ed wing	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	or Nu	nount Imber Shares		(Instr. 4)				
Employee Stock Option (right to buy)	\$5.97	12/27/2022		D			142,500		(2)	04/05/2031	Commo Stock	ⁿ 14	42,500	\$0 0 ⁽¹⁾)	D		

Explanation of Responses:

1. The option was cancelled by mutual agreement of the reporting person and Jaguar Health, Inc. The reporting person received \$300 as consideration for the cancellation.

2. The option will vest ratably on a monthly basis over 36 months from the grant date, so long as the executive remains employed by the issuer.

/s/ Lisa A. Conte

** Signature of Reporting Person

12/28/2022

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 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.

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.