SEC For	rm 4																	
FORM 4 UNIT				ITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549											OMB APPROVAL			
Section 16. Form 4 or Form 5 obligations may continue. See					NT OF CHANGES IN BENEFICIAL OWNERSHIP d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									OMB Number: 3235-0287 Estimated average burden hours per response: 0.5				
1. Name and Address of Reporting Person <sup>*</sup> Wolin Jonathan S.				2	2. Issuer Name <b>and</b> Ticker or Trading Symbol Jaguar Health, Inc. [JAGX]							eck all applica Director	able)	10% Owner				
(Last) (First) (Middle) C/O JAGUAR HEALTH, INC. 200 PINE STREET, SUITE 400					3. Date of Earliest Transaction (Month/Day/Year) 04/05/2021							X bilder (give the below) below) Chief of Staff, CCO & GC						
(Street) SAN CA 94104 FRANCISCO			4	4. If Amendment, Date of Original Filed (Month/Day/Year)							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)	(S	State)	(Zip)	rivati		curitie	<u>ε Λ</u>	ouired D	isnosed	of or Be	neficially	/ Owned						
Table I - Non-Deriva   1. Title of Security (Instr. 3)   2. Transa Date (Month/D				ransacti	ction 2A. Deemed Execution Date		e, 3. 4. Secur Transaction Dispose Code (Instr.		ities Acquir	-	5. Amoun Securities Beneficia Owned Fe	s Form Ily (D) c ollowing (I) (II		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
							Code \	/ Amount	(A) o (D)	Price	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)			
			Table II - Der (e.g					uired, Dis s, options				Owned						
1. Title of Derivative Security (Instr. 3)	e Conversion Date Execution Date, 1 or Exercise (Month/Day/Year) if any		4. Transa Code 8)		5. Number Derivativ Securitie Acquired or Dispos of (D) (In 3, 4 and	re es I (A) sed str.	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	1011(3)				
Stock option (right to buy) <sup>(1)</sup>	\$1.99	04/05/2021 <sup>(2)</sup>		A		120,000		(3)	04/05/2031	Common Stock	120,000	\$0	120,0	00	D			
Restricted stock	(4)	04/05/2021 <sup>(2)</sup>		A		60,000		(5)	(5)	Common	60,000	\$0	60,00	00	D			

## Explanation of Responses:

units<sup>(1)</sup>

1. Granted pursuant to the issuer's 2014 Stock Incentive Plan.

2. The option and restricted stock unit grants were approved by the issuer's board of directors on April 5, 2021.

3. 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.

4. Each restricted stock unit represents a contingent right to receive one share of the issuer's common stock.

5. The restricted stock units vest in three equal annual installments beginning on April 5, 2022, the first anniversary of the grant date. Vested shares will be delivered to the reporting person on the vesting date or dates provided in the grant notice.

/s/ Jonathan S. Wolin	
** Signature of Penerting Person	

Stock

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

04/07/2021 Date

Signature of Reporting Person

 $\ast$  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.