FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

-	OIVID APPROVAL								
	OMB Number:	3235-0287							
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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).

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* MICEK JOHN					2. Issuer Name and Ticker or Trading Symbol Jaguar Health, Inc. [JAGX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
MICER JOHN					==0===================================								X	Director	•		10% Ow	ner	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)								_	Officer (give title Other (spe- below) below)				pecify	
C/O JAGUAR HEALTH, INC.						07/24/2019													
201 MISSION STREET, SUITE 2375																			
					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)													Line	Eorm fil	ed by One	Danoi	rting Person		
SAN FRANCI	sco C	A	94105										filed by More than C		Ü	ing			
(City)	(S	tate)	(Zip)																
		Та	ble I - Non-D	erivati	ve Se	ecurities	s Ac	quire	d, Di	sposed (of, or	Ber	eficially	Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						2A. Deemed Execution Date, if any (Month/Day/Yea		, Transaction Code (Instr.		n Dispose	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Beneficia Owned Fo	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct III Indirect Estr. 4)	7. Nature of Indirect Beneficial Ownership	
						Cod	de V	Amount	t (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
			Table II - De (e.							posed of converti				Dwned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		es Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title		Amount or Number of Shares		Transaction(s) (Instr. 4)				
Stock Option (right to buv) ⁽¹⁾	\$1.73	07/24/2019 ⁽²⁾		A		121,573		(3)	07/24/2022	Comm Stoc		121,573	\$0	121,57	73	D		

Explanation of Responses:

- 1. Granted pursuant to the issuer's 2014 Equity Incentive Plan.
- 2. The option grant was approved by the issuer's board of directors on July 19, 2019, subject to James J. Bochnowski, the chairman of the board of directors, and Karen S. Wright, the Chief Financial Officer of the issuer, determining the exact number of option shares to be granted per option based on the issuer's fully diluted shares outstanding following the issuer's underwritten public offering that closed on July 23, 2019. Mr. Bochnowski and Ms. Wright certified the exact number of option shares to be granted on July 24, 2019, such that the effective date of the option grant was July 24, 2019.
- 3. Vests in equal monthly installments beginning on July 24, 2019, with three months of options, or 10,131 options, vested as of the grant date based on the reporting person's number of years of service on the issuer's board of directors, such that the grant is vested in full on the 3-year anniversary of the grant date.

/s/ Karen S. Wright, Attorneyin-Fact 07/26/2019

Date

** Signature of Reporting Person

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.