The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

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				OMB APPROVAL
UNI	TED STATES SECURITIE Washingt	GE COMMISSION	OMB 3235-	
		on, D.C. 20549 ORM D		Number: 0076
	N T . • • • • •		•,•	Estimated average burden
	Notice of Exemp	t Offering of Secu	rities	hours per
				response: 4.00
1. Issuer's Identity				
	Previous			
CIK (Filer ID Nun	nber) Names	X None		Entity Type
0001585608			X Corporation	on
Name of Issue	r		Limited P	artnership
Jaguar Animal Health, Inc.			Limited L	iability Company
Jurisdiction o			General P	-
Incorporation/Organ DELAWARE	IIZation		Business	
Year of Incorpora	tion/Organization		Other (Sp	ecify)
-	uvu vi Sallizativii			
Over Five Years Ago X Within Last Five Years (S	Specify Vear) 2013			
Yet to Be Formed	pecity real/2013			
ree to De i onneu				
2. Principal Place of Busines	s and Contact Information			
Name	of Issuer			
Jaguar Animal Health, Inc.				
	Address 1		Street Address 2	
185 BERRY STREET, SUIT				
City	State/Province/Country			nber of Issuer
SAN FRANCISCO	CALIFORNIA	94107	415-371-830	0
3. Related Persons				
Last Name	Fir	rst Name	Middle Na	ame
Conte	Lisa			
Street Address 1	Stree	t Address 2		
185 Berry Street, Suite 1300				
City		vince/Country	ZIP/Postal	Code
San Francisco	CALIFORNIA		94107	
Relationship: X Executive	Officer X Director Promo	ter		
Clarification of Response (if	Necessary):			
Last Name	Fir	st Name	Middle Na	ame
Thomspn	Charles			
Street Address 1	Stree	t Address 2		
185 Berry Street, Suite 1300				
City	State/Pro	vince/Country	ZIP/Postal	Code
San Francisco	CALIFORNIA		94107	

Clarification of Response (if Necessary):

Relationship: X Executive Officer Director Promoter

Last Name	First Name	Middle Name
Martinod	Serge	
Street Address 1	Street Address 2	
185 Berry Street, Suite 1300 City	State/Province/Country	ZIP/PostalCode
San Francisco	CALIFORNIA	94107
Relationship: X Executive Office		
Clarification of Response (if Neces	sary):	
Last Name	First Name	Middle Name
Bochnowski	James	Mildule Name
Street Address 1	Street Address 2	
185 Berry Street, Suite 1300		
City	State/Province/Country	ZIP/PostalCode
San Francisco	CALIFORNIA	94107
Relationship: Executive Officer	X Director Promoter	
Clarification of Response (if Neces	sary):	
Last Name	First Name	Middle Name
Yang	Zhi	
Street Address 1	Street Address 2	
185 Berry Street, Suite 1300		
City	State/Province/Country	ZIP/PostalCode
San Francisco Relationship: Executive Officer	CALIFORNIA V Directory December 1	94107
Clarification of Response (if Neces		
Last Name	First Name	Middle Name
Qui	Joe	
Street Address 1	Street Address 2	
Street Address 1 185 Berry Street, Suite 1300		7ID/DestalCode
Street Address 1 185 Berry Street, Suite 1300 City	State/Province/Country	ZIP/PostalCode 94107
Street Address 1 185 Berry Street, Suite 1300 City San Francisco	State/Province/Country CALIFORNIA	ZIP/PostalCode 94107
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer	State/Province/Country CALIFORNIA X Director Promoter	
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer Clarification of Response (if Neces	State/Province/Country CALIFORNIA X Director Promoter	
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer Clarification of Response (if Neces	State/Province/Country CALIFORNIA X Director Promoter	94107
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer Clarification of Response (if Neces 4. Industry Group	State/Province/Country CALIFORNIA X Director Promoter sary):	94107 Retailing
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer Clarification of Response (if Necess 4. Industry Group Agriculture	State/Province/Country CALIFORNIA X Director Promoter sary): Health Care Biotechnology	94107 Retailing Restaurants
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer Clarification of Response (if Necess 4. Industry Group Agriculture Banking & Financial Services	State/Province/Country CALIFORNIA X Director Promoter sary): Health Care Biotechnology Health Insurance	94107 Retailing Restaurants Technology
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer Clarification of Response (if Neces (if Neces Agriculture Banking & Financial Services Commercial Banking Insurance Investing	State/Province/Country CALIFORNIA X Director Promoter sary): Health Care Biotechnology Health Insurance Hospitals & Physicians	94107 Retailing Restaurants Technology Computers
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer Clarification of Response (if Necess Clarification of Response (if Necess Agriculture Banking & Financial Services Commercial Banking Insurance Investing Investment Banking	State/Province/Country CALIFORNIA X Director Promoter sary): Health Care Biotechnology Health Insurance Hospitals & Physicians X Pharmaceuticals	94107 Retailing Restaurants Technology Computers Telecommunications
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer Clarification of Response (if Necess (if Necess) Agriculture Banking & Financial Services Commercial Banking Insurance Investing Investing Investment Banking Pooled Investment Fund	State/Province/Country CALIFORNIA X Director Promoter sary): Health Care Biotechnology Health Insurance Hospitals & Physicians X Pharmaceuticals Other Health Care	94107 Retailing Restaurants Technology Computers Telecommunications Other Technology
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer Clarification of Response (if Necess Clarification of Response (if Necess Agriculture Banking & Financial Services Commercial Banking Insurance Investing Investing Investment Banking Pooled Investment Fund Is the issuer registered as	State/Province/Country CALIFORNIA X Director Promoter sary): Health Care Biotechnology Health Insurance Hospitals & Physicians X Pharmaceuticals Other Health Care Manufacturing	94107 Retailing Restaurants Technology Computers Telecommunications Other Technology Travel
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer Clarification of Response (if Neces Clarification of Response (if Neces 4. Industry Group Agriculture Banking & Financial Services Commercial Banking Insurance Investing Investment Banking Pooled Investment Fund Is the issuer registered as an investment company under the Investment Company	State/Province/Country CALIFORNIA X Director Promoter sary): Health Care Biotechnology Health Insurance Hospitals & Physicians X Pharmaceuticals Other Health Care Manufacturing Real Estate	94107 Retailing Restaurants Technology Computers Telecommunications Other Technology Travel Airlines & Airports
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer Clarification of Response (if Neces Clarification of Response (if Neces 4. Industry Group Agriculture Banking & Financial Services Commercial Banking Insurance Investing Investment Banking Pooled Investment Fund Is the issuer registered as an investment company under	State/Province/Country CALIFORNIA X Director Promoter sary): Health Care Biotechnology Health Insurance Hospitals & Physicians X Pharmaceuticals Other Health Care Manufacturing Real Estate Commercial	94107 Retailing Restaurants Technology Computers Telecommunications Other Technology Travel
Street Address 1 185 Berry Street, Suite 1300 City San Francisco Relationship: Executive Officer Clarification of Response (if Neces Clarification of Response (if Neces 4. Industry Group Agriculture Banking & Financial Services Commercial Banking Insurance Investing Investment Banking Pooled Investment Fund Is the issuer registered as an investment company under the Investment Company	State/Province/Country CALIFORNIA X Director Promoter sary): Health Care Biotechnology Health Insurance Hospitals & Physicians X Pharmaceuticals Other Health Care Manufacturing Real Estate	94107 Retailing Restaurants Technology Computers Telecommunications Other Technology Travel Airlines & Airports

Business ServicesResidentialOtherEnergyOther Real EstateCoal MiningElectric UtilitiesElectric UtilitiesImage: ConservationEnergy ConservationEnvironmental ServicesImage: ConservationOil & GasOther EnergyImage: Conservation5. Issuer SizeSize

Revenue Range	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
X Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

	Investment Company Act Section 3(c)		
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1)	Section 3(c)(9)	
Rule 504 (b)(1)(i)	Section 3(c)(2)	Section $3(c)(10)$	
Rule 504 (b)(1)(ii) Rule 504 (b)(1)(iii)	Section 3(c)(3)	Section 3(c)(11)	
Rule 505	Section 3(c)(4)	Section 3(c)(12)	
X Rule 506(b)	Section 3(c)(5)	Section 3(c)(12)	
Rule 506(c)			
Securities Act Section 4(a)(5)	Section 3(c)(6)	Section 3(c)(14)	
	Section $3(c)(7)$		

- 7. Type of Filing
- X New Notice Date of First Sale 2014-06-02 First Sale Yet to Occur Amendment
- 8. Duration of Offering

Does the Issuer intend this offering to last more than one year? Yes X No

9. Type(s) of Securities Offered (select all that apply)

Equity	Pooled Investment Fund Interests
X Debt	Tenant-in-Common Securities
X Option, Warrant or Other Right to Acquire Another Security	Mineral Property Securities
X Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security	X Other (describe)
	Convertible Promissory Notes and underlying Common Stock

10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as Yes X No a merger, acquisition or exchange offer?

Clarification of Response (if Necessary):

11. Minimum Investment

Minimum investment accepted from any outside investor \$0 USD

12. Sales Compensation

Recipient			Recipient CRD Number X None	
(Associated) Broker or De	ealer X None		(Associated) Broker or Dealer CRD Number X	None
Stree	t Address 1		Street Address 2	
City		1	State/Province/Country	ZIP/Postal Code
State(s) of Solicitation (see Check "All States" or che	11 0 /	All States	Foreign/non-US	
13. Offering and Sales Am	iounts			
Total Offering Amount	\$300,000 USD or	Indefinite		
Total Amount Sold	\$300,000 USD			
Total Remaining to be Sol	d \$0 USD or	Indefinite		

Clarification of Response (if Necessary):

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

2

Sales Commissions	\$0 USD	Estimate
Finders' Fees	\$0 USD	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

• Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*

- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Jaguar Animal Health, Inc.	/s/ Charles O. Thompson	Charles O. Thompson	Chief Financial Officer	2014-06-12

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.