FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

vasilington, D.C. 20040	

Washington D.C. 20549

	Check this box if no longer subject to
١	Section 16. Form 4 or Form 5
	obligations may continue. See
	Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 Estimated average burden 0.5 hours per response

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Wright Karen Steil						2. Issuer Name and Ticker or Trading Symbol Jaguar Health, Inc. [ JAGX ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify				
(Last) (First) (Middle) C/O JAGUAR HEALTH, INC. 201 MISSION STREET, SUITE 2375						3. Date of Earliest Transaction (Month/Day/Year) 07/24/2019									X below) below)  CFO and Treasurer				
(Street) SAN FRANCISCO CA 94105 (City) (State) (Zip)				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transc Date (Month/D					Execution Date			, Transaction Disposed O Code (Instr.			ties Acquired (A) or I Of (D) (Instr. 3, 4 and			Beneficia Owned Fo	Forn ly (D) o		Direct Indirect Estr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A)	) or )	Price	Reported Transacti (Instr. 3 a				Instr. 4)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
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/Year)	4. Transaction Code (Instr. r) 8)		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)			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 Exercisa		Expiration Date	Title	or Ni	nount ımber Shares		Transaction(s) (Instr. 4)				
Stock Option (right to	\$1.73	07/24/2019 <sup>(2)</sup>		A		303,932		(3)		07/24/2022	Commo Stock		03,932	\$0	303,93	32	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 the reporting person, in her capacity as 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 the reporting person 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 four months of options, or 33,770 options, vested as of the grant date based on the reporting person's number of years of employment with the issuer, such that the grant is vested in full on the 3-year anniversary of the grant date.

/s/ Karen S. Wright

07/26/2019

\*\* Signature of Reporting Person

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.