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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden 0.5 hours per response.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)										
1. Name and Address of Reporting Person [*] Luchi Monica E.	2. Issuer Name and Ticker or Trading Symbol Brickell Biotech, Inc. [BBI]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) 			
(Last) (First) C/O BRICKELL BIOTECH, INC., 5777 AVENUE, SUITE 102		3. Date of Earliest Transaction (Month/Day/Year) 05/05/2022						X_Officer (give title below)Other (specify below) Chief Medical Officer		
(Street) BOULDER, CO 80301	2	4. If Amendment, Date 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) (State)	(Zip)	Table I - Non-Derivative Securities Acqui					uired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year	Execution Date, if any	(Instr. 8)		(A) or Disposed of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership of Ind Form: Benef	Beneficial
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)

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

Persons who respond to the collection of information contained in SEC 1474 (9-02) this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securitie

-	(e.g., puts, cans, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Number	of	6. Date Exercisab	le and	7. Title and	Amount of	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	Derivative Expiration Date			Underlying Securities Deri		Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code		Securities (Month/Day/Year) ((Instr. 3 and 4) Security		Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Acquired (A)			(Instr. 5)		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					or Dispose	d of	E						Security:	(Instr. 4)
	Security					(D)						Direct (D)			
						(Instr. 3, 4,	,						1	or Indirect	
						and 5)						Transaction(s)	< / <		
				Code	v	(A)			Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
				Code	v	(A)	(D)				Shares				
Stock Option (right to buy)	\$ 0.26	05/05/2022		А		325,000		05/05/2023 ⁽¹⁾	05/05/2032	Common Stock	325,000.00	\$ 0	325,000	D	

Reporting Owners

	Relationships						
Reporting Owner Name / Address		10% Owner	Officer	Other			
Luchi Monica E. C/O BRICKELL BIOTECH, INC. 5777 CENTRAL AVENUE, SUITE 102 BOULDER, CO 80301			Chief Medical Officer				

Signatures

/s/ Christine G. Long, Attorney-in-Fact for Monica Luchi (power of attorney previously filed)	05/09/2022
Signature of Reporting Person	Date

Explanation of Responses:

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).

The stock options will vest 25% on the first anniversary of the grant date, and the remainder will vest in equal monthly installments over the following three (1) years.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.