FORM 4

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

| OMB APPROVAL | | | | | | |
|------------------------|-----------|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | |
| Estimated average burd | den | | | | | |
| hours per response | 0.5 | | | | | |

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

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 Ty | pe Response | s) | | | | | | | | | | | | | | | |
|---|-------------|------------|---|--|---|---|--|----------------|--------------------------------|---|------------------|--|--|------|--|---|--|
| 1. Name and Address of Reporting Person * Brown Robert Busard | | | | | 2. Issuer Name and Ticker or Trading Symbol Brickell Biotech, Inc. [BBI] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| (Last) (First) (Middle) C/O BRICKELL BIOTECH, INC., 5777 CENTRAL AVENUE, SUITE 102 (Street) BOULDER, CO 80301 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/15/2020 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | | X Officer (give title below) Other (specify below) Chief Executive Officer Chief Executive Officer 6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | | | | | | | | | | | | | | | | |
| (Ci | ty) | (State) | (Zip) | | Table I - Non-Derivative Securities Acqui | | | | | | | ies Acquire | ired, Disposed of, or Beneficially Owned | | | | |
| 1.Title of S (Instr. 3) | ecurity | | 2. Transaction Date (Month/Day/Ye | Exe ear) any | , | on Date, if | 3. Trai | 8) | (1 | . Securitie A) or Disp Instr. 3, 4 | osed o | of (D) Ov Tr (Ir | Amount of Sec wned Following ansaction(s) str. 3 and 4) | | C F C o | Ownership orm: Direct (D) r Indirect | '. Nature of Indirect Beneficial Ownership Instr. 4) |
| | | | Table | | | ve Securitie | | t c uire | his for current d, Dispo | m are no ly valid (osed of, or | ot requ OMB o | uired to re control nu ficially Ov | | | | n SEC 1 | 474 (9-02) |
| | | rivative | Date Execution Date, if | 4. 5. Numb Transaction Derivativ Code Securitie (Instr. 8) Acquired Disposed | | 5. Number Derivative Securities Acquired (A Disposed o (Instr. 3, 4, | ber of ive ies ed (A) or ed of (D) | | Date Exe | ons, convertible secur ate Exercisable and ration Date nth/Day/Year) | | 7. Title an | Securities Deriv d 4) Secur | | 9. Number of Derivative Securities Beneficially Owned Following Reported | 10. Ownership Form of Derivative Security: Direct (D) or Indirect | Beneficia Ownershi (Instr. 4) |
| | | | | Code | v | (A) | (D) | Dat Exe | e ercisable | Expiration Date | on | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | (I) (Instr. 4) | |
| Stock Option (right to buy) | \$ 0.8 | 09/15/2020 | | A | | 1,000,000 |) | | (1) | 09/15/2 | 2030 | Commo Stock | n 1,000,000 | \$ 0 | 1,000,000 | D | |

Reporting Owners

| | Relationships | | | | | | | |
|--|---------------|--------------|-------------------------|-------|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | |
| Brown Robert Busard C/O BRICKELL BIOTECH, INC. 5777 CENTRAL AVENUE, SUITE 102 BOULDER, CO 80301 | X | | Chief Executive Officer | | | | | |

Signatures

| **Signature of Reporting Person Date | /s/ Christine G. Long, Attorney-in-Fact for Robert B. Brown (power of attorney previously filed) | 09/16/2020 |
|--------------------------------------|--|------------|
| | **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).
- (1) The stock options will vest 25% on September 15, 2021, and the remainder will vest in equal monthly installments over the following three 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.