## FORM 4

(Print or Type Responses)

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

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burden					
hours per respons	e 0.5				

5. Relationship of Reporting Person(s) to Issuer

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

Name and Address of Reporting Person \*

#### 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

2. Issuer Name and Ticker or Trading Symbol

Gorgas Gregory D.				ARTELO BIOSCIENCES, INC. [ARTL]							X_ Director10% Owner				
(Last) (First) (Middle) C/O ARTELO BIOSCIENCES, INC., 888 PROSPECT STREET, SUITE 210					3. Date of Earliest Transaction (Month/Day/Year) 12/03/2021						X Officer (give title below) Other (specify below)  See Remarks				
(Street) LA JOLLA, CA 92037				4. If A	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(Ci	ity)	(State)	(Zip)		Table I - Non-Derivative Securities Acqui					ies Acquire	nired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Ye	ar) any		on Date, if	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficiall Owned Following Reported Transaction(s)		O	wnership orm: Of B	Beneficial
				(Mo	onth/I	Day/Year)	Coo	de V	Amount (A) or	(Instr. 3 and 4)				r Indirect (D) (I) (I) (D) (II) (II) (II) (II) (II	wnership nstr. 4)
			Table					this for current uired, Dispo	s who respon m are not req ly valid OMB	uired to re control nu eficially Ow	spond unles mber.			n SEC 14	74 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)		4. Transac Code	4. 5. Number Derivative Securities		er of 6. Date E Expiratio (Month/I d (A) or d of (D)				1 Amount of g Securities d 4)		9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownershi Form of Derivativ Security: Direct (D or Indirect	Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s (Instr. 4)	(I) (Instr. 4)	
Stock Option (right to buy)	\$ 0.63	12/03/2021		A		1,355,000	0	(1)	12/03/2031	Commor Stock	1,355,000	\$ 0	1,355,000	D	

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Gorgas Gregory D. C/O ARTELO BIOSCIENCES, INC. 888 PROSPECT STREET, SUITE 210 LA JOLLA, CA 92037	X		See Remarks			

#### **Signatures**

/s/ Gregory D. Gorgas	12/06/2021
**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).
- Subject to the Reporting Person continuing to be a Service Provider (as such term is defined in the Issuer's 2018 Equity Incentive Plan) through each such applicable vesting date, twenty five percent (25%) of the shares subject to the option shall vest on the one (1) year anniversary of the Vesting Commencement Date, and one forty-eighth (1/48th) of the shares subject to the option shall vest each month thereafter on the same day of the month as the Vesting Commencement Date (and if there is no corresponding day, on the last day of the month), such that the option shall be fully vested on the four (4) year anniversary of the Vesting Commencement Date. "Vesting Commencement Date" shall mean December 3, 2021.

#### Remarks:

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.