FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PROVAL
OMB Number:	3235-0287
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0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). Se	ee Instruction 1	0.																	
Name and Address of Reporting Person* Andrade Robert					2. Issuer Name and Ticker or Trading Symbol FENNEC PHARMACEUTICALS INC. [5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
					FENC]								1	Director Officer (give title			Other (s		
(Last)	(Last) (First) (Middle)														below) below) CHIEF FINANCIAL OFFICER				
C/O FENNEC PHARMACEUTICALS, INC.				3. Date of Earliest Transaction (Month/Day/Year)										CITIL	7 1 11 (7 11 (Lorrici		
PO BOX 13628, 68 TW ALEXANDER DRIVE				11/30/2024															
(Street)				4. If Amendment, Date of Original Filed (Month/Day/Year)							′ I	6. Individual or Joint/Group Filing (Check Applicable Line)							
RESEAF TRIANC		າ າ	7709											V	Form	filed by On	e Rep	oorting Pers	on
PARK	ILE IV		7709												Form Perso		re tha	an One Repo	orting
(City)	(St	ate) (Z	Zip)																
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Disp	posed of	, or E	Benefic	cially	Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,				ies Acquired (A Of (D) (Instr. 3,		, 4 and Secur Benet		cially Following	Forn (D) c	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) (D)	or Pri	Duine Tr		ansaction(s) nstr. 3 and 4)			(11001. 4)
Common shares ⁽¹⁾ 12/02/2				2024			A		1,042	A	A :	\$0 12		28,423		D			
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 Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) Frice of Derivative Security 3. Transaction Date, if any (Month/Day/Year)		on Date,	4. Transaction Code (Instr. 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 (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v			Date Expiration Exercisable Date		Title	Amoun or Number of Shares	er						

Explanation of Responses:

1. Represents shares released from restriction from shares awarded 3-31-2023.

12/02/2024 /s/ Robert Andrade

** Signature of Reporting Person

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.