FORM 4

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

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 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).

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*     RALLIS CHRIS A						2. Issuer Name and Ticker or Trading Symbol FENNEC PHARMACEUTICALS INC. [FENC]										ionship of Reporting all applicable) Director		10% Ow		vner
(Last) C/O FEN	Last) (First) (Middle) C/O FENNEC PHARMACEUTICALS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 07/05/2024										Officer (give title below)		Other (s below)		specify
PO BOX 13628, 68 TW ALEXANDER DRIVE					4. If Amendment, Date of Original Filed (Month/Day/Year)										ne)	idual or .	al or Joint/Group Filing (Check Applicab			
	RESEARCH FRIANGLE NC 27709				Rule 10b5-1(c) Transaction Indication										Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City) (State) (Zip)				Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															ed to	
		Tabl	e I - Nor	n-Deriv	ative	Sec	uriti	es Ac	quire	d, Di	spo	osed o	f, or B	enefic	ally	Owne	d			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D.						Execu			Co	Transaction Disposed Code (Instr. 5)							es ally Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
									Cod	le V	7	Amount	(A) (D)	or Pric	,	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Shares <sup>(1)</sup> 07/05						/2024			N			1,792	2 A	\$2	.79	79 47,630			D	
Common Shares <sup>(2)</sup> 07/05/					/2024				S			1,173	E	\$6	\$6.03		46,457		D	
		Т	able II -	Derivat (e.g., p								,			•	wned				
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,		ransaction ode (Instr.		of E		6. Date Exercisal Expiration Date Month/Day/Year			Amount Securiti Underly Derivati	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Exp Dat	piration te	Title	Amount or Number of Shares						
Common Shares <sup>(3)</sup>	\$2.79	07/05/2024			M			1,792	08/04/	2014	08/0	/04/2024	Options	1,792		\$2.79	179,80	2	D	

## **Explanation of Responses:**

- 1. Shares acquired through the exercise of an option pursuant to a 10b5-1 plan adopted on August 17, 2023
- 2. Shares sold to satisfy tax obligation on option exercise.
- 3. Represents options exercised pursuant to a 10b5-1 program adopted August 17, 2023.

/s/ Chris A Rallis

07/07/2024

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.