FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>Sistilli Carlo</u>						2. Issuer Name and Ticker or Trading Symbol Edesa Biotech, Inc. [EDSA]								neck all appli X Direct	or		10% Owner		
(Last) (First) (Middle) C/O EDESA BIOTECH INC.						Date of /08/20		t Tran	saction ((Montl	h/Day/Year)		Office below	r (give tit)	tle	Oth belo	er (specify w)	' 	
100 SPY COURT					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) MARKHAM A6 L3R 5H6													X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	itate)	(Zip)																
		Tab	le I - N	on-Deriv	/ative	e Sec	uritie	s Ac	quire	d, Di	sposed o	of, or Be	neficia	lly Owne	d				
Date			2. Transac Date (Month/Da		Exe) if ar	2A. Deemed Execution Date, if any (Month/Day/Year)					4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an 5)			of ly llowing	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature Indirect Beneficia Ownershi	ect eficial ership	
										Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Shares 01/08/2				2020	020			P		2,436	A	\$4.11 ⁽¹⁾	2,43	36	6 I		Held by York-Cav Enterprises, Inc. ⁽²⁾		
		٦	Γable II								posed of converti			y Owned		,			_
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	on Date,	4. Transa Code (8)				6. Date Exerci Expiration Dar (Month/Day/Yo		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Num derivat Securit Benefic Owned Followi Report Transa (Instr. 4	ive ties cially ing ed ction(s)	10. Owners Form: Direct (or Indir (I) (Inst	ship of In Bene (D) Own rect (Inst	Nature ndirect leficial nership tr. 4)
			Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares								
Common Share Warrants (Right to Buy) ⁽³⁾	\$4.8	01/08/2020			P		1,827		07/08/2	020	07/08/2023	Common Shares	1,827	(1)	1,8	327	I		k-Cav erprises,
Common Share Warrants (Right to	\$4	01/08/2020			P		1,218		07/08/2	020	11/08/2020	Common Shares	1,218	(1)	1,2	218	I		k-Čav erprises,

- 1. The reported securities are included within 2,436 Common Shares purchased by the reporting person for \$4.11 per Common Share. Each Common Share includes the purchase of Class A Warrants to purchase 0.75 of a Common Share, and Class B Warrants to purchase 0.50 of a Common Share.
- 2. York-Cav Enterprises, Inc. is partially owned by the reporting party.Mr. Sistilli disclaims beneficial ownership except to the extent of his precautionary interest therein.
- 3. Consists of Class A Warrants to purchase Common Shares. The Class A Warrants are exercisable beginning on July 8, 2020 and expire on July 8, 2023.
- 4. Consists of Class B Warrants to purchase Common Shares. The Class B Warrants are exercisable beginning on July 8, 2020 and expire on November 8, 2020.

01/10/2020

** Signature of Reporting Person

Date

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.