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
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).

(First)

C/O EDESA BIOTECH INC.

(Last)

(Middle)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Nijhawan Pardeep (Last) (First) (Middle) C/O EDESA BIOTECH INC.			<u>E</u> 6	Susuer Name and Ticker or Trading Symbol Edesa Biotech, Inc. [EDSA] Date of Earliest Transaction (Month/Day/Year) 03/15/2022								S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner X Officer (give title Other (specify below) Chief Executive Officer										
(Street) MARKH			L3R Zip)	5H6	4.	. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Y Form filed by More than One Reporting Person								
(City)	(5			Non Doring	4:5.44			uiti o c				Dia		of ou	Donofic	امند	h. Our					
Date		2. Transaction	ar)	2A. Deemed Execution Date,		,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			ed (A) or	5. Amount of		f	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Natu Indired Benefic Owner (Instr. 4	t cial ship			
									Code	v	Ar	nount	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)			(111541.4)		(man. 4)		
Common	Shares			03/15/2022	2				P			2,000	A	A \$2.799		557,812		D				
Common	Common Shares													2,128,652		I	Medi Profe		ep wan			
Common	Shares																224,094		I		Held by The Digestive Health Clinic Inc. ⁽¹⁾	
Common	Common Shares													371,727		I		Held by 1968160 Ontario Inc. ⁽¹⁾				
		Tal	ble	II - Derivati													Owne	d			,	
Derivative Conversion Date Exercise (Month/Day/Year) if a		a. Deemed 4. Tracecution Date,		ransaction De Code (Instr. Se Ac (A Di of (Instr. Se Ac (I		5. Nu of Deriv Secu Acqu (A) o Disp of (D (Inst	5. Number		6. Date Expiration (Month/Date		xercisable and		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		. Price of perivative lecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		Forr Dire or Ir	nership n: ct (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Cod	le V		(A)	(D)	Da Ex	te ercisa	ble	Expiration Date	on Title	Amoun or Numbe of Shares	er						
	nd Address o	f Reporting Person*																				
(Last)	ESA BIOT	(First)		(Middle)																		
(Street) MARKH	IAM	A6		L3R 5H6																		
(City)		(State)		(Zip)																		
		f Reporting Person* an Medicine		fessional C	Cor	<u>p</u>																

100 SPY COURT		
(Street) MARKHAM	A6	L3R 5H6
(City)	(State)	(Zip)

Explanation of Responses:

1. Each of Pardeep Nijhawan Medicine Professional Corporation, The Digestive Health Clinic Inc. and 1968160 Ontario Inc. are wholly-owned by Pardeep Nijhawan.

<u>/s/ Pardeep Nijhawan</u> 03/16/2022

/s/ Pardeep Nijhawan

Medicine Professional

Corporation by Pardees

03/16/2022

Corporation, by Pardeep

<u>Nijhawan</u>

** 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.