FORM 4

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

Washington, D.C. 20549

bject	STATEMENT	OF	CHAN	(

## TATEMENT 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).

1. Name and Address of Reporting Person\*

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

	nd Address of ad Adviso	Reporting Person ors, Inc.	*		D	ELC		SYS	STE	MS,	ÍN	<u>C.</u> [ DC	тн]				of Reportin licable) tor		s) to Is	
(Last)	(Fii LESLEY S	rst) ( TREET WEST	Middle	*)	04	/18/2	024					Day/Year)			la di	below		b	elow)	specify
SUITE 3					4.1	f Ame	ndment,	Date	of On	ginal I	Filed	(Month/Da	ıy/Year)		. Indivi	Form	Joint/Group filed by One filed by Mor	e Reporting	Perso	on
(Street) TORON	ΤΟ Αθ	5 N	M4Y (	0G7	Rı	ule	10b5-	1(c	) Tra	ansa	act	ion Indi	icatio	n	Λ	Perso				
(City)	(St	ate) (	Zip)			Chec	ck this box fy the affin	to ind	dicate t e defen	hat a ti	ransa nditio	action was m	ade purs 0b5-1(c)	suant to a . See Instr	contra	ct, instru 10.	uction or writte	en plan that	is inter	nded to
		Table	1 - N	lon-Deriva	itive	Sec	urities	Ac	quire	ed, C	Disp	osed of	, or B	enefic	ially	Own	ed			
1. Title of S	Security (Ins	tr. 3)		2. Transaction Date (Month/Day/Ye		Execuif any	eemed ution Date th/Day/Ye	e,	3. Transa Code ( 8)		4. S Dis	Securities A sposed Of (E	.cquired O) (Instr.	(A) or . 3, 4 and	5)	5. Amo Securi Benefi Owned Report	ties cially I Following	6. Owners Form: Dir (D) or Indirect (I (Instr. 4)	ect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Am	nount	(A) or (D)	Price		Transa	ction(s) 3 and 4)	(111501. 4)		(IIISU. 4)
Common	Shares			04/18/202	24				X		61	.9,946 <sup>(1)</sup>	A	\$6,199	9.46	2,7	63,468	I		By Rosalind Advisors Inc., the advisor to the Rosalind Master Funds <sup>(2)</sup>
Common	Shares			04/18/202	24				С		99	91,615 <sup>(3)</sup>	A	\$0		2,7	63,468	I		By Rosalind Advisors Inc., the advisor to the Rosalind Master Funds <sup>(2)</sup>
		Та	ble II	l - Derivati (e.g., pu	ive S	Secu	rities A	Acq	uirec	d, Dis	spo	sed of,	or Be	neficia	lly C	wned	k			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if any	Deemed cution Date,	4. Tran	sactio e (Inst	5. Nu	rative rities rired r osed ) r. 3, 4	f 6. D Exp (Mo		erci:	sable and	7. Title Amou Securi Under Deriva	e and nt of ities lying itive ity (Instr.	8. Pr		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form Direct or Ind (I) (In	t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	e V	(A)	(D)	Date Exe	e rcisab		Expiration Date	Title	Amount or Number of Shares						
	nd Address of ad Adviso	Reporting Person ors, Inc.	*															-		
(Last) 15 WELL SUITE 3	LESLEY S	(First) TREET WEST	1)	Middle)																
(Street)	ГО	A6	N	M4Y 0G7																
(City)		(State)	(2	Zip)																

SALAMON	STEVEN A J							
(Last)	ast) (First) (Middle)							
15 WELLESLE	EY STREET WES	T, SUITE 326						
(Street)								
TORONTO	A6	M4Y 0G7						
(City)	(State)	(Zip)						
Aharon Gil (Last)	(First)	(Middle)						
15 WELLESLEY STREET WEST SUITE 326								
(Street)								
TORONTO	A6	M4Y 0G7						
(City)	(State)	(Zip)						

## **Explanation of Responses:**

- $1.\,619{,}946\ common\ shares\ acquired\ via\ exercise\ of\ pre-funded\ warrants\ at\ \$0.01$
- 2. Each Reporting Persons disclaims beneficial ownership over the shares except to the extent of his or its respective pecuniary interest therein
- 3. 991,615 Common shares are acquired via conversion of 1,065 F-2 preferred shares and 3,010 F-3 preferred shares.

<u>Steven Salamon</u> <u>05/16/2024</u>
\*\* 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.