FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|--|--|
| OMB Number: 3235-0 | | | | | | | | | | |
| 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).

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* Kazeminy Assad J | | | 2. Issuer Name and Ticker or Trading Symbol <u>Lucy Scientific Discovery, Inc.</u> [LSDI] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify | | | | | | |
|--|---|--|---|-----------------------------|----------------|---|---------------------------|---|--|--|---|-------|--|---|--|--|--|
| | C/O LUCY SCIENTIFIC DISCOVERY, INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/13/2023 | | | | | | | | X Officer (give title below) below) Chief Scientific Officer | | | |
| 301-1321 BLANSHARD STREET (Street) VICTORIA A1 V8W 0B6 (City) (State) (Zip) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| | | Table | I - Non-Deriva | tive S | Secui | ities | Acq | uire | d, Dis | posed | d of, | or Be | nefic | ially Own | ed | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | · 1 | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, and 5) | | | Seci Ben Own Follo | owing | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | Code | v | V Amount (A) (C) | | A) or D) | Price | Tran | orted saction(s) r. 3 and 4) | | | |
| Common Shares 02/13/2023 | | | 02/13/2023 | | | | J ⁽¹⁾ | | 85,0 | 00 | A | \$2.4 | | 85,000 | I | ALK Biopharmaceutical LLC ⁽²⁾ | |
| 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 or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. 8) | | of Deriv Secu Acqu (A) o Disp of (D | r osed) r. 3, 4 | Expir | te Exercisable and ation Date th/Day/Year) | | nd | | t of les ring live y (Instr.) | 8. Price of Derivative Security (Instr. 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 | | (A) | (D) | Date Expiratio | | | tion | N | or Number of Shares | | | | | | | |

Explanation of Responses:

- 1. These common shares were issued AJK Biopharmaceutical LLC ("AJK") pursuant to a debt settlement with the Issuer in satisfaction of approximately \$204,000 due to AJK in consulting fees.
- 2. The securities are held by AJK Biopharmaceutical LLC ("AJK"). The reporting person is the sole member of AJK. The reporting persons disclaims beneficial ownership of the reported securities except to the extent of his pecuniary interest therein.

/s/ Christopher McElvany, Attorney-in-Fact

02/15/2023

** 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.