FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

	OMB Number:	3235-0287
	Estimated average burden	
1	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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

10b5-1(c). See In	struction 10.									
Name and Address of Reporting Person*  Farfel Gail M			2. Issuer Name and Ticker or Trading Symbol ProMIS Neurosciences Inc. [ PMN ]	(Check all applicable)	Γ' '					
			3. Date of Earliest Transaction (Month/Day/Year)	X Director	10% Owner					
(Last) (First) (Middle)		(Middle)	08/23/2023	X Officer (give title below)	Other (specify below)					
C/O PROMIS N	EUROSCIENC	ES INC.,1920 YONGE		Chief Executive Officer						
STREET, SUITE 200			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (C	Check Applicable Line)					
				X Form filed by One Report	Form filed by One Reporting Person					
(Street)				Form filed by More than C	One Reporting Person					
TORONTO	A6	M4S 3E2		,						
(City)	(State)	(Zip)								

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

" ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	2. Transaction Date (Month/Day/Year)	2A. Deemed 3. Execution Date, if any Code (I (Month/Day/Year) 8)		tion	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Shares	08/23/2023		A <sup>(1)</sup>		53,192	A	(1)	55,192	D	

#### 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)	4. Transac Code (Ir 8)		Derivative Expirat		Expiration D	Expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Warrants to purchase Common Shares	\$1.75	08/23/2023		A <sup>(1)</sup>		53,192		02/21/2024	02/21/2029	Common Shares	53,192	(1)	53,192	D	

# Explanation of Responses:

1. On August 23, 2023, pursuant to a Unit Purchase Agreement entered into by the Company with selected investors (the "Offering"), the Reporting Person acquired 53,192 common share units (each, a "Common Share Unit"), each unit consisting of one of the Company's common shares, no par value (the "Common Shares"), and one warrant to purchase one Common Share. The purchase price for each Common Share Unit was \$1.88 per Common Share Unit.

> /s/ Max A. Milbury, Attorney-in-Fact for Gail M. Farfel

08/25/2023 \*\* 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.