FORM 4

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

Washington, D.C. 20549

OMB APPROVAL

| OMB Number:            | 3235-0287 |
|------------------------|-----------|
| Estimated average burd | len       |
| 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

#### 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

| affirmative defens<br>10b5-1(c). See In | e conditions of Rule struction 10. |          |   |   |  |  |  |  |
|---|------------------------------------|----------|---|---|--|--|--|--|
| 1. Name and Addres                      | ss of Reporting Person             | *        | 2. Issuer Name and Ticker or Trading Symbol ProMIS Neurosciences Inc. [ PMN ] | Relationship of Reporting Person(s) to Issuer (Check all applicable)      Provided Technology      100, Occupant (Check all applicable)               |  |  |  |  |
| (Last)                                  | (First)                            | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 06/12/2025                   | X Director 10% Owner Officer (give title Other (specify below) below)   |  |  |  |  |
|   | EUROSCIENCES :<br>0 YONGE STREE    |          | 4. If Amendment, Date of Original Filed (Month/Day/Year)                      | 6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |  |  |  |  |
| (Street) TORONTO                        | A6                                 | M4S 3E2  |   | runn med by wide than One Reporting Person  |  |  |  |  |
| (City)                                  | (State)                            | (Zip)    |   |   |  |  |  |  |

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

| 1. Title of Security (Instr. 3) | Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | Transaction Code (Instr. |   | 4. Securities Acquired (A) or<br>Disposed Of (D) (Instr. 3, 4 and 5) |               |       | Securities<br>Beneficially Owned<br>Following Reported | Form: Direct (D)<br>or Indirect (I)<br>(Instr. 4) | Beneficial<br>Ownership |
|---------------------------------|--------------------------|---|--------------------------|---|--|---------------|-------|--|---|-------------------------|
|                                 |                          |   | Code                     | v | Amount   | (A) or<br>(D) | Price | Transaction(s)<br>(Instr. 3 and 4)                     |   | (Instr. 4)              |

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

|     | 1. Title of<br>Derivative<br>Security (Instr.<br>3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security |            | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | Code (In | snaction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |        |     |                     | 7. Title and Amount of<br>Securities Underlying<br>Derivative Security (Instr.<br>3 and 4) |                  | Derivative                          | Reported | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|-----|---|---|------------|---|----------|--|--------|-----|---------------------|--|------------------|-------------------------------------|----------|--|--|--|
|     |   |   |            |   | Code     | v  | (A)    | (D) | Date<br>Exercisable | Expiration<br>Date   | Title            | Amount<br>or<br>Number<br>of Shares |          | Transaction(s)<br>(Instr. 4)   |  |  |
| - 1 | Option (right to<br>buy)                            | \$0.5   | 06/12/2025 |   | A        |  | 20,000 |     | (1)                 | 06/12/2035   | Common<br>Shares | 20,000                              | \$0      | 20,000   | D  |  |

### Explanation of Responses:

1. The options shall vest in full on the earlier of the first anniversary of the Grant Date and June 12, 2026, subject to continued service on the Board.

/s/ Max Milbury, Attorney in Fact for Eugene Williams 06/16/2025

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).