## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

| (Print or Type Re  | esponses                             | )  |  |  |      |            |     |  |  |  |  |   |   |   |                                    |   |  |
|--|--------------------------------------|--|--|--|------|------------|-----|--|--|--|--|---|---|---|------------------------------------|---|--|
| 1. Name and Address of Reporting Person * FROM STEPHEN   |                                      |  |  | 2. Issuer Name and Ticker or Trading Symbol KIORA PHARMACEUTICALS INC [KPRX]     |      |            |     |  |  |  |  | eX]   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner                             |   |                                    |   |  |
| (Last) (First) (Middle)<br>C/O KIORA PHARMACEUTICALS,<br>INC., 1371 E. 2100 SOUTH, SUITE 200   |                                      |  |  | 3. Date of Earliest Transaction (Month/Day/Year) 12/07/2021                      |      |            |     |  |  |  | X Officer (give title below) Other (specify below)  Executive Chairman |   |   |   |                                    |   |  |
| (Street)   |                                      |  |  | 4. If Amendment, Date Original Filed(Month/Day/Year)                             |      |            |     |  |  |  | /Day/Year)   | 6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person |   |   |                                    |   |  |
| WALTHAM, MA 02452 (City) (State) (Zip)   |                                      |  |  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |      |            |     |  |  |  |  |   |   |   |                                    |   |  |
| (Instr. 3) Date of the control of th |                                      | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date<br>any<br>(Month/Day/Ye |  | ŕ    | (Instr. 8) |     | (  | 4. Securities Acquir<br>(A) or Disposed of<br>(D)<br>(Instr. 3, 4 and 5) |  | of   | Beneficia   | nt of Securities<br>ally Owned Following<br>I Transaction(s)<br>and 4)  |   | Form:<br>Direct (D)<br>or Indirect | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |                                      |  |  |  |      |            | С   | ode  | V  | Amoun  | (A) or (D)   | Price   |   |   |                                    | (I)<br>(Instr. 4)   |  |
| Common Stock   |                                      | 12/07/2021                                 |  |  |      | F          | (1) | 2  | 273  |  | \$<br>1.3  | 68,019  |   | D   |                                    |   |  |
|  |                                      |  | Table II - I   |  |      |            |     | t  | the for<br>d, Disp   | rm dis   | plays a c  | curre<br>eficial  | ntly valid  |   | spond unle<br>trol numbe           |   |  |
| (Instr. 3) Price   | version<br>xercise<br>e of<br>vative | 3. Transaction<br>Date<br>(Month/Day/Y     | 3A. Deemed<br>Execution Date                         | 4.<br>Transaction<br>Code<br>(Instr. 8)  |      | 5.         |     | 6. Date Exercisable and Expiration Date (Month/Day/Year) |  | 7. Title and<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 and<br>4) |  | Derivative<br>Security<br>(Instr. 5)  | 9. Number of<br>Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s<br>(Instr. 4) | Owners Form o Derivat Securit Direct ( or India | Benefici<br>Ownersl<br>(Instr. 4)  |   |  |
|  |                                      |  |  |  | Code | V          | (A) |  | Date<br>Exerci   |  | Expiration<br>Date   | Title   | Amount<br>or<br>Number<br>of<br>Shares  |   |                                    |   |  |
| Reportin   | g O                                  | wners                                      |  |  |      |            |     |  |  |  |  |   |   |   |                                    |   |  |

|  |          | Relationships |                    |       |  |  |  |  |
|--|----------|---------------|--------------------|-------|--|--|--|--|
| Reporting Owner Name / Address   | Director | 10%<br>Owner  | Officer            | Other |  |  |  |  |
| FROM STEPHEN<br>C/O KIORA PHARMACEUTICALS,<br>1371 E. 2100 SOUTH, SUITE 200<br>WALTHAM, MA 02452 | INC. X   |               | Executive Chairman |       |  |  |  |  |

### **Signatures**

| /s/ Sarah Romano, Attorney-in-Fact* | 12/08/2021 |
|-------------------------------------|------------|
| **Signature of Reporting Person     | Date       |

### **Explanation of Responses:**

- \* 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)
- (1) Sale of shares to cover taxes due on restricted stock that vested on 12/01/2021.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.