FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	DС	20549	
vasiliigton,	D.C.	20049	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours per reepen	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

1. Name and Address of Reporting Person* Roemer Alan S.					Issuer Name and Ticker or Trading Symbol NexImmune, Inc. [NEXI] Date of Earliest Transaction (Month/Day/Year)									all app Direc	tor er (give title	ng Pe	10% O	wner		
(Last) (First) (Middle)					11/2	11/21/2023									belov	/)		below)		
C/O NEXIMMUNE, INC.					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
9119 GA	ATHER RO	AD												X Form filed by One Reporting Person						
(Street) GAITHERSBURG MD 20877															Form Perso	filed by Mo	re tha	an One Rep	orting	
-					Rul	Rule 10b5-1(c) Transaction Indication														
(City) (State) (Zip)						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - N	lon-Deriva	tive S	Secui	rities	Ac	quire	d, Di	sposed of	f, or E	Benefici	ally	Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/N				Execution Da		· /	Code (Instr.							5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) or (D)	Price	Tran		action(s) . 3 and 4)			(11301. 4)		
Common Stock 11/21/20					23				S		3,833	D	\$2.162	21(1)		3,992		D		
Common Stock 11/22/202				23				S		3,992	D	\$1.943	434(2)		0		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)	perivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any		4. Transa Code (8)	Instr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date			Amou Secur Unde Deriv	Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of		Price of rivative curity str. 5) Securities Beneficially Owned Following Reported Transactio (Instr. 4)		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

Explanation of Responses:

- 1. The price reflects the average selling price of the common stock sold. These shares were sold in multiple transactions at prices ranging from \$2.05 to \$2.39 per common stock. The Reporting Person undertakes to provide, upon request by the staff of the Securities and Exchange Commission, the Issuer or a security holder of the Issuer, full information regarding the number of common stock sold at each price
- 2. The price reflects the average selling price of the common stock sold. These shares were sold in multiple transactions at prices ranging from \$1.91 to \$2.05 per common stock. The Reporting Person undertakes to provide, upon request by the staff of the Securities and Exchange Commission, the Issuer or a security holder of the Issuer, full information regarding the number of common stock sold at each price.

Remarks:

/s/John Rudy, attorney-in-fact 11/22/2023

** Signature of Reporting Person

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.