FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

D.C. 20549	OME

Filed pursuant to Section 16(a) of the Securities Exchange Act of 19
or Section 30(h) of the Investment Company Act of 1940

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

Name and Address of Reporting Person* Roemer Alan S.					2. Issuer Name and Ticker or Trading Symbol NexImmune, Inc. [NEXI]									p of Reporting Pe blicable)		son(s) to Iss			
(Last)	(F	irst)	(Middle)				of Earliest	Tran	saction (Mo	nth/E	Day/Year)		Office	Director Officer (give title below)		Other (s below)			
C/O NEXIMMUNE, INC. 9119 GAITHER ROAD					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) GAITHERSBURG MD 20877													X Form filed by One Reporting Person Form filed by More than One Reporting Person						
					- Ru	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.													
		Tab	le I - Nor	า-Deriง	<i>r</i> ative	Se	curities	s Ac	quired,	Disp	osed o	of, or Be	neficia	lly Owne	d				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					r) E	2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.		4. Securities Acquired (ADisposed Of (D) (Instr. 35)			Securiti Benefic Owned	ecurities Form		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	t (A) or Pr		Transac				Instr. 4)			
		T							uired, Di s, option					y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transacti Code (Ins				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amount or Number of Shares						
Stock Option (right to buy)	\$0.29	07/05/2023			A		44,983		07/05/2024	4 07	7/04/2033	Common Stock	44,983	\$0.00	44,983		D		

Explanation of Responses:

/s/ John Rudy, attorney-in-fact 07/07/2023

** 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.