SEC For																					
FORM 4 UNITE				D STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549													OMB APPROVAL				
Section 16. Form 4 or Form 5 obligations may continue. See							T OF CHANGES IN BENEFICIAL OWNERSHIP pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940											OMB Number: 3235-0287 Estimated average burden hours per response: 0.5			
1. Name and Address of Reporting Person* Borkowski Astrid						2. Issuer Name and Ticker or Trading Symbol <u>HilleVax, Inc.</u> [HLVX]									k all applic Directo	able)	g Pers	on(s) to Issu 10% Ow Other (s	ner		
	C/O HILLEVAX, INC.,					3. Date of Earliest Transaction (Month/Day/Year) 02/01/2023									below)	hief Medical Officer			pecily		
75 STATE STREET, SUITE 100 - #9995 (Street) BOSTON MA 02109					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (CLine) X Form filed by One Reportin Form filed by More than Or Person											orting Persor	,			
(City)	(S		(Zip)	- Doriy		. 50	ouritio		auirod	Die	nocod o	for P	nofio	ially	Ownod						
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D)				action	ction 2A. Deem Executior			3. Transa Code (I	ction Instr.	4. Securit	ties Acquired (A) d Of (D) (Instr. 3, 4		or and	5. Amou Securitie Beneficia	int of 6. (es Foi ally (D) Following (I) d		: Direct of r Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock				02/01	01/2023				Code	v	Amount 51,333	(D)		ce	(Instr. 3 and 4) 219,774 ⁽²⁾		-	D			
		-	Fable II -	Deriva	tive	Seci						or Ber	neficia	lly C							
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/Day	d Date,	4. Transa Code (3)	action	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Ex Expiratior (Month/Da	ercis 1 Date	able and	7. Title a of Secur Underlyi Derivativ	Fitle and Amount Securities		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactiv (Instr. 4)	s Ily I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amou or Numb of Share	ber							
Stock Option (Right to Buy)	\$18	02/01/2023			A		77,000		(3)	c	01/31/2033	Commor Stock	77,0	00	\$0.00	77,00	0	D			

Explanation of Responses:

1. Represents restricted stock units ("RSUs") which will vest as to 25% of the total number of RSUs granted on each of the first four anniversaries of February 1, 2023, subject to the reporting person's continuous service to the Issuer on the applicable vesting dates. Each RSU represents a contingent right to receive one share of common stock of the Issuer and the RSUs have no expiration date.

2. Includes 341 shares acquired under the HilleVax, Inc. employee stock purchase plan on November 15, 2022.

3. The option is exercisable as it vests. The option will vest with respect to 25% of the shares of common stock on February 1, 2024, and will vest with respect to the remaining shares in equal monthly installments over the following three years subject to the reporting person's continuous service to the Issuer on the applicable vesting dates.

Remarks:

/s/ Paul Bavier, Attorney-in-Fact for Astrid Borkowski

orting Person Date

02/03/2023

** 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.