FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

on, D.C. 20549	OMB APPROVAL				
S IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028			

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	323	
Es		Estimated average burden	
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:		
r lied pursuant to Section 10(a) or the Securities Exertainge Act of 1994			

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

					or Sec	tion 30(h) of the	investme	nt Con	ірапу Асі	01 18	940						
Name and Address of Reporting Person* Sepulveda Jaime				2. Issuer Name and Ticker or Trading Symbol HilleVax, Inc. [HLVX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Sepurveda Jamie</u>											_ :	X Directo	r		10% Ov	/ner	
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/07/2023								Officer below)	(give title		Other (s below)	pecify
C/O HILLEVAX, INC.,				4. If Amendment, Date of Original Filed (Month/Day/Year)							6 1	6. Individual or Joint/Group Filing (Check Applicable					
75 STATE STREET, SUITE 100 - #9995										Line							
(Street)	NI M	[A	02109											iled by Mor		One Repo	- 1
БОЗТО	N 1V1	A	02109		Dula	10b5-1(c	\ Trans	acti	on Inc	dica	tion						
(City)	(5	tate)	(Zip)		Kuie	1003-1(0) ITALIS	acti	OII IIIC	iica	uon						
(City)	(3	iale)	(ΔΙΡ)			eck this box to inc isfy the affirmative								on or writter	ı plan tl	nat is intende	ed to
		Tab	le I - Nor	n-Deriva	tive S	ecurities Ac	quired,	Disp	osed o	of, o	r Ben	eficial	ly Owned	t			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			Execution Date,		Code (Instr. 5)					Benefici Owned F	es Forn ially (D) o Following (I) (Ir		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	t	(A) or (D)	Price	Transaction(s)			(Instr. 4)	
		Т				curities Acq Is, warrants							Owned				
		ransactio ode (Insti		6. Date E Expiratio (Month/D		7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)			10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

Explanation of Responses:

\$17.94

(D)

Date Exercisable

(1)

Expiration Date

06/06/2033

Remarks:

Stock

Option

/s/ Paul Bavier, Attorney-in-06/09/2023 **Fact**

\$0.00

22,500

D

** Signature of Reporting Person Date

or Number

22,500

Stock

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).

06/07/2023

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

Code

(A)

22,500

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.

^{1.} The option was granted pursuant to the Registrant's non-employee director compensation program. The option shall vest and/or become exercisable on the first to occur of (i) the first anniversary of the grant date or (ii) the next occurring annual meeting of our stockholders, in each case, subject to the non-employee director continuing in service on our board of directors through such vesting dates.