FORM 4

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

OMB APPROVAL
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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 Ty	pe Response	s)																	
Name and Address of Reporting Person * Pridgen William					2. Issuer Name and Ticker or Trading Symbol Virios Therapeutics, Inc. [VIRI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner						
(Last) (First) (Middle) C/O VIRIOS THERAPEUTICS, INC., 44 MILTON AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 01/27/2022							-	Office	r (give title belo	ow)	Other (sp	pecify belo	w)	
(Street) ALPHARETTA, GA 30009				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City		(State)	(Zip)			Tab	le I -	Non	-De	rivative	Securit	ies Ac	cquire	ed, Dispo	osed of, or I	Beneficially	Owned	il	
(Instr. 3) Da		2. Transaction Date (Month/Day/Year)	any	ition Date, if	if C	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			D) H	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership Form:		Beneficial		
			(Month/Day/Year)		ar)	Cod	le	V	Amount	(A) or (D)	Prio		or (I		Direct or Ind (I) (Instr.	Indirect (Instr. 4			
Common Stock		01/27/2022				P			4,180	A	\$ 5.98 (1)	303	18,722		I		01 (k) ccount		
Common Stock								710,734			D								
Reminder:	Report on a s	separate line f	for each class of secu	ırities b	peneficially	own	ned d	lirectl	y or	indirectl	у.								
								(con	tained i	n this	form	are n	not requ	ction of inf uired to res OMB cont	spond unle		SEC 14	74 (9-02)
			Table II -		ative Secu puts, calls,									Owned					
	Derivative Conversion Date Security Or Exercise (Mo		3. Transaction Date (Month/Day/Year) 3. Deeme Execution any (Month/Da		Code			er ntive ties red sed 3,	and Expiration Date (Month/Day/Year)		t I	7. Title Amou Under Securi (Instr. 4)	nt of lying tties 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	y Se Di or n(s) (I)	wnership orm of erivative curity: rect (D) Indirect	Beneficia Ownershi (Instr. 4)	
					Code V	V (A)		Dat Exe	te ercisable	Expira Date	tion	Title	Amount or Number of Shares	er				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Pridgen William C/O VIRIOS THERAPEUTICS, INC. 44 MILTON AVENUE ALPHARETTA, GA 30009	X					

Signatures

/s/ Greg Duncan, Attorney-in-Fact	01/28/2022		
**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).
- The price reported in Column 4 is a weighted average price. The shares were purchased in multiple transactions at prices ranging from \$5.80 to \$6.27, inclusive. The (1) reporting person undertakes to provide Virios Therapeutics, Inc. ("Virios"), any security holder of Virios or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in this footnote to this Form 4.
- (2) The number of shares reported are indirectly held within the Reporting Person's 401(k) account and are invested in the Tuscaloosa Surgical Assoc PC 401k U/A Dtd Jan 1, 2001 of which the Reporting Person is trustee.

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.