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

OMB APPROVAL						
OMB Number: 323	5-0287					
Estimated average burden						
hours per response	0.5					

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

1. Name and Address of Reporting Person * Gendreau Roger Michael				2. Issuer Name and Ticker or Trading Symbol Virios Therapeutics, Inc. [VIRI]					5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O VIRIOS THERAPEUTICS, INC., 44 MILTON AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 06/23/2022						X_Officer (give title below) Other (specify below) CHIEF MEDICAL OFFICER					
(Street)				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 uired, Disposed of, or Beneficially Owned				
ALPHARETTA, GA 30009 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqu						es Acquir						
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Dater)		d 3 Date, if C		nsaction 4	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		. Amount of Solved Follow Transaction(s)	Securities Being Reported	eneficially d	5. 7. Ownership of Borm: Bo	7. Nature of Indirect Beneficial	
				(Month/Da		//Year)	Cod	le V A	(A) or (D)	<u> </u>	(Instr. 3 and 4)		oı (I	r Indirect (Ins	wnership nstr. 4)
Reminder:	•							in this	s who respon form are not	required	to respond	unless the		eu SEC 14	74 (9-02)
Reminder:	•		Table II -					in this display	form are not of some are not of some are not of some of the some o	required valid ON eficially (to respond IB control r	unless the		eu SEC 14	/4 (9-02)
1. Title of Derivative		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	ts, c	5. Numb of Deriving Securities Acquired or Dispo of (D) (Instr. 3,	er ative es d (A)	in this display	form are not as a currently osed of, or Ben nvertible secuercisable and Date	required valid ON efficially (to respond MB control re Dwned and Amount orlying es	unless the number.	9. Number of Derivative Securities Beneficially Owned Following Reported	f 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	ts, c	5. Numb of Deriving Securities Acquired or Dispo of (D)	er ative es d (A)	in this display	s a currently sed of, or Ben nvertible secu ercisable and Date y/Year) Expiration	required valid ON eficially (rities) 7. Title of Unde Securities	to respond MB control re Dwned and Amount orlying es	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following	f 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indire Beneficia Ownersh

Ī				Relationships	
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other
	Gendreau Roger Michael C/O VIRIOS THERAPEUTICS, INC. 44 MILTON AVENUE ALPHARETTA, GA 30009			CHIEF MEDICAL OFFICER	

Signatures

/s/ Greg Duncan, Attorney-in-Fact	06/30/2022
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).
- (1) The stock option vests one-third on June 23, 2023 and 1/24th monthly thereafter.

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.