FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

/ashington, E).C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number: 3235-0287 Estimated average burden									
	hours per response.	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). 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* Richman Michael			2. Issuer Name and Ticker or Trading Symbol NextCure, Inc. [NXTC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Richma	in Michae	<u>e1</u>			TCZTCC	<u> </u>	<u></u> [Turre j			<u>></u>	Director		10% O	vner
(Last)	(F	irst)	(Middle)		Date of Earliest Transaction (Month/Day/Year)						Officer (below)	give title	Other (: below)	specify	
C/O NEXTCURE, INC.				C	03/15/2021						President & CEO				
9000 VII	RGINIA M	ANOR ROAD, S	SUITE 200												
				4	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) BELTSV	ILLE M	ID	20705								2		ed by One Re	porting Perso	n
			20703									Form fil Person	ed by More th	an One Repo	ting
(City)	(S	tate)	(Zip)									FCISOII			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
Date			. Transacti ate Month/Day	Execution Date,		Code (Instr.			5. Amoun Securities Beneficia Owned Fo	s Form (D) or ollowing (I) (In	rm: Direct	7. Nature of ndirect Beneficial Ownership Instr. 4)			
								Code V	Amount	(A) o (D)	Price	Transacti (Instr. 3 a	on(s) nd 4)		11311.4)
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned														
			(е	.g., put	s, cal	ls, warr	ants	s, options,	converti	ble secu	ırities)				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Code	Transaction Derivative Code (Instr. Securities		e s I (A) sed str.	Expiration Date (Month/Day/Year) of Secu Underly Derivati		of Securit Underlyin Derivative	Title and Amount Securities nderlying erivative Security nstr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Employee Stock Option (Right to Buy)	\$12.59	03/15/2021		A		300,000		(1)	03/14/2031	Common Stock	300,000	\$0	300,000	D	

Explanation of Responses:

1. One fourth of the option vests on March 15, 2022. The remainder vests in 36 monthly installments beginning on April 15, 2022. The remainder vests in 36 monthly installments beginning on April 15, 2022. The remainder vests in 36 monthly installments beginning on April 15, 2022. The remainder vests in 36 monthly installments beginning on April 15, 2022. The remainder vests in 36 monthly installments beginning on April 15, 2022. The remainder vests in 36 monthly installments beginning on April 15, 2022. The remainder vests in 36 monthly installments beginning on April 15, 2022. The remainder vests in 36 monthly installments beginning on April 15, 2022. The remainder vests in 36 monthly installments beginning on April 15, 2022. The remainder vests in 36 monthly installments beginning on April 15, 2022. The remainder vests in 36 monthly installments beginning to the properties of t

Remarks:

/s/ Steven P. Cobourn, as attorney-in-fact for Michael Richman

** Signature of Reporting Person Date

03/16/2021

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.