FORM 4

Check this box if no longer subject

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | D.C. 20549 |
|---------------|------------|
|---------------|------------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Form: Direct (D) or Indirect

(I) (Instr. 4)

Beneficial Ownership (Instr. 4)

| to Sec   | tion 16. Form 4 | or Form 5      | 0.,,           |  | •••  | · •.                              | .,  |   |          | 120., .    |                              |  |  | Estima  | ated average burd | den 0.5    |
|--|-----------------|----------------|----------------|--|--|-----------------------------------|---|---|----------|------------|------------------------------|--|--|---|-------------------|------------|
|  |                 |                |                |  |  |                                   | resuant to Section 16(a) of the Securities Exchange Act of 1934 |   |          |            |                              |  |  | hours per response:                                 |                   |            |
| 1. Name and Address of Reporting Person*  Zhen Marianne  (Last) (First) (Middle)  1350 OLD BAYSHORE HIGHWAY, SUITE 400 |                 |                |                | or Section 30(h) of the Investment Company Act of 1940  2. Issuer Name and Ticker or Trading Symbol Innoviva, Inc. [ INVA ]  3. Date of Earliest Transaction (Month/Day/Year) 02/18/2022 |  |                                   |   |   |          |            |                              | Relationship of Reporting Person(s) to Issuer neck all applicable)  Director 10% Owner  X Officer (give title Other (specify below) below)  Chief Accounting Officer |  |   | Owner<br>(specify |            |
| (Street) BURLIN  | NGAME CA        |                | 94040<br>(Zip) |  | 4. If Amendment, Date of Original Filed (Month/Day/Year) |                                   |   |   |          |            | 6.<br>Lin                    | ne)<br>X Form<br>Form  | ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person |   |                   |            |
| (0.9)  | (0.0            |                |                | n-Deriva   | tive S   | ecur                              | ities Aca   | uired.  | Dis      | posed of,  | or Bei                       | neficia  | ally Own   | ed  |                   |            |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)  |                 |                | tion           | 2A. D<br>Execu   | eemed<br>ution Date,                                     | 3.<br>Transaction<br>Code (Instr. |   | 4. Securities Acquired (A<br>Disposed Of (D) (Instr. 3, |          |            | 5. Amo<br>Securit<br>Benefic | unt of<br>ties<br>cially<br>Following  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |                   |            |
|  |                 |                |                |  |  |                                   |   | Code  | v        | Amount     | (A) or<br>(D)                | Price  |  | ed<br>ction(s)<br>3 and 4)                          |                   | (Instr. 4) |
| Common Stock 02/18/2   |                 |                |                | 2022   |  |                                   | F   |   | 2,277(1) | D          | \$19.                        | 99 32  | 2,181  | D   |                   |            |
|  |                 | Та             | ble II -       |  |  |                                   |   |   |          | osed of, o |                              |  |  | l   |                   |            |
| 1. Title of  | 2.              | 3. Transaction | 3A. De         | emed   | 4.   |                                   | 5. Number   | 6. Date Exercisable and 7. Title at                     |          |            | 8. Price of                  | 9. Number  | of 10.   | 11. Nature  |                   |            |

(Month/Day/Year)

Date

Exercisable

Expiration

Date

## **Explanation of Responses:**

or Exercise Price of Derivative

Security

Security (Instr. 3)

1. The shares were withheld by the Issuer to satisfy income tax withholding obligations associated with the quarterly vesting of previously granted employee equity grants.

(A) (D)

Code (Instr.

8)

Code

Derivative

Securities Acquired

(A) or Disposed

of (D) (Instr. 3, 4 and 5)

02/22/2022 /s/ Marianne Zhen

Securities

Title

Underlying Derivative

Security (Instr. 3 and 4)

Amount Number

Shares

\*\* Signature of Reporting Person Date

Security (Instr. 5)

Securities Beneficially

Owned

Following Reported

Transaction(s) (Instr. 4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

if any (Month/Day/Year)

\* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

(Month/Day/Year)

\*\* 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.