## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.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

Name and Address of Reporting Person*     Schlesinger Sarah J.						2. Issuer Name and Ticker or Trading Symbol Innoviva, Inc. [ INVA ]									ationship o k all applic Director			on(s) to Issu 10% Ow		
					- 3. [	Date o	of Earliest	Trans	saction (Mo	nth/E	Day/Year)				Officer	give title		Other (s	pecify	
(Last)	(F	irst)	(Middle)		06	06/17/2024									below)			below)	, ,	
1350 OL	D BAYSH	ORE HIGHWAY	, SUITE 4	00		4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					_   7'	4. II Amendment, Date of Original Filed (Month/Day/Year)								Line)						
(Street)	(Street)														Form filed by One Reporting Person					
	IGAME C	A	94010												Form fil Person	m filed by More than One Reporting son				
(City)	(S	tate)	(Zip)		R	Rule 10b5-1(c) Transaction Indication														
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tal	ole I - Nor	1-Deri	vativ	e Se	curitie	s Ac	quired,	Dis	posed o	f, or Be	nefic	ially	Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D							2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed O Code (Instr.		ties Acquired (A) or I Of (D) (Instr. 3, 4 and			Beneficia Owned F	es For ally (D) following (I) (		: Direct      - Indirect       str. 4)   (	7. Nature of Indirect Beneficial Ownership		
										v	Amount	(A) (D)	Pr	ce	Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)	
Common Stock 06/1					7/2024				A		13,923 <sup>(1)</sup> A			\$ <mark>0</mark>	118,629			D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)  2. Conversion Date (Month/Day/Year Price of Derivative Security			Execution Date, if any		4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)		Date Exercisable		Expiration Date	Title	Amo or Num of Shar	ber						
Non- statutory Stock Option	\$16.16	06/17/2024			A		10,000		06/17/2025	5(1)	06/16/2034	Common Stock	10,0	000	\$0	30,000	)	D		

## **Explanation of Responses:**

1. The Reporting Person was granted restricted stock units ("RSUs") and options upon the conclusion of the Issuer's 2024 annual meeting of stockholders. 100% of the RSUs and options will vest at the sooner of the next annual stockholder meeting or the one-year anniversary of grant, subject to the Reporting Person's continuous service as an Outside Director through the applicable vesting date.

/s/ Sarah Schlesinger

06/20/2024

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.