Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, D.C. 20549 |
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| gton, D.C. 20549 | OMB APPRO |
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|                  |           |

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|
|           |            |               |           |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| OMB APPROVAL             |  |  |  |  |  |  |  |
|--------------------------|--|--|--|--|--|--|--|
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| hours per response:      |  |  |  |  |  |  |  |

| transac<br>contrac<br>for the<br>securit<br>intende<br>defens | this box to indiction was made<br>ct, instruction o<br>purchase or sa<br>ies of the issue<br>ed to satisfy the<br>e conditions of<br>ee Instruction 1 | pursuant to a r written plan le of equity r that is affirmative Rule 10b5- |                                 |          |  |      |          |  |               |   |   |                             |   |            |   |  |
|---|---|--|---------------------------------|----------|--|------|----------|--|---------------|---|---|-----------------------------|---|------------|---|--|
| 1   | Name and Address of Reporting Person*  Zhen Marianne  |  |                                 |          | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Innoviva, Inc. [ INVA ]           |      |          |  |               | (Che  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (speci |                             |   |            |   |  |
| (Last)<br>1350 OL<br>SUITE 4                                  |   | rst) (I<br>ORE HIGHWAY   | Middle)                         |          | 3. Date of Earliest Transaction (Month/Day/Year) 08/20/2024                          |      |          |  |               |   | below) Chief Accounting Officer   |                             |   |            |   |  |
| (Street)  | NGAME CA  |  | 4010<br>Zip)                    | 4. If A  | 4. If Amendment, Date of Original Filed (Month/Day/Year)                             |      |          |  |               |   |   | Line                        | ndividual or Joint/Group Filing (Check Applicable e)  Form filed by One Reporting Person Form filed by More than One Reporting Person |            |   |  |
| 1. Title of Security (Instr. 3) 2. Transac<br>Date            |   |  | tion 2A. Deemed Execution Date, |          | 3. Transaction Code (Instr. 8)  4. Securities Acquired (Disposed Of (D) (Instr. 3 5) |      | d (A) or | ) or 5. Amount of Securities Beneficially Owned Follow |               | 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>action(s)<br>3 and 4) |   | (Instr. 4) |   |  |
| Common  | Stock   |  | 08/2                            | 0/2024   |  |      |          | F  |               | 975(1)  | D   | \$18.49                     | 4:  | 5,615      | D |  |
|   |   | Tal  | ala II - Dariv                  | ativa Ca |  | : ^  |          |  |               |   |   |                             |   |            |   |  |
|   |   |  |                                 |          |  |      |          |  |               | osed of, convertib  |   |                             | Owne  | d          |   |  |

## **Explanation of Responses:**

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.

/s/ Marianne Zhen 08/22/2024

\*\* 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.