FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington,    | D.C. | 20549 |
|----------------|------|-------|
| vvasiliigtoii, | D.C. | 20049 |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |           |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |
| hours ner resnonse.      | 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* <u>Cotter Sara</u>   |   |            | <u>In</u>    | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Invivyd, Inc. [ IVVD ] |  |   |  |      |   | (Ch                  | Relationship of the contract o | cable)   | Person(s) to Iss  |  |               |       |
|---|---|------------|--------------|---|--|---|--|------|---|----------------------|--|--|---|--|---------------|-------|
| (Last)  | (Fi   | irst)      | (Middle)     |   |  |   | pate of Earliest Transaction (Month/Day/Year) 21/2024    |      |   |                      |  | Officer<br>below)  | (give title   | Other (below)  | specify       |       |
| C/O INVIVYD, INC.<br>1601 TRAPELO ROAD, SUITE 178             |   |            |              | 4.1   | 4. If Amendment, Date of Original Filed (Month/Day/Year) |   |  |      |   |                      | Line   | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person                          |   |  |               |       |
| (Street)  | AM M  | Ā          | 02451        |   |  | ر مار،  | 10hE /   | 1/0\ | Transa  | otion In             | diagtion   |  | Form f<br>Persor  |  | than One Repo | rting |
| (City)  | (S  | tate)      | (Zip)        |   |  | 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. |  |      |   |                      |  |  | d to  |  |               |       |
|   |   | Tab        | le I - Non   | -Deriv  | vativ  | e Se  | curities   | s Ac | quired, D   | isposed              | of, or Be  | neficial   | y Owned   |  |               |       |
| 1. Title of Security (Instr. 3)  2. Transar Date (Month/Date) |   |            |              | Execution Date,   |  | 3. Transaction Code (Instr. 8)  3. 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)  |  |      |   | Beneficia<br>Owned F | Form   | . Ownership<br>form: Direct<br>D) or Indirect<br>I) (Instr. 4)   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership               |  |               |       |
|   |   |            |              |   |  |   |  | Code | Amoun   | (A) o                | Price  | Reported<br>Transact<br>(Instr. 3 a  | ion(s)  |  | Instr. 4)     |       |
|   |   | 7          | Fable II - E |   |  |   |  |      | uired, Dis<br>, options   |                      |  |  | Owned   |  |               |       |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | 2. Conversion or Exercise Price of Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year)  (Month/Day/Year) |            | ate,         |   | ransaction of ode (Instr. Derivative                     |   | 6. Date Exercisable and Expiration Date (Month/Day/Year) |      | 7. Title and Amount<br>of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                      | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)  | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |               |       |
|   |   |            |              |   | Code   | v   | (A)  | (D)  | Date<br>Exercisable   | Expiration<br>Date   | Title  | Amount<br>or<br>Number<br>of<br>Shares   |   |  |               |       |
| Stock<br>Option<br>(Right to<br>Buy)                          | \$2.21  | 05/21/2024 |              |   | A  |   | 41,369   |      | (1)   | 05/20/2034           | Common<br>Stock  | 41,369   | \$0.00  | 41,369   | D             |       |

## **Explanation of Responses:**

1. This option was granted on May 21, 2024 and vests in full upon the earlier of (i) May 21, 2025 or (ii) the date of the Issuer's 2025 Annual Meeting of Stockholders, subject to the Reporting Person's continuous service through such vesting date

> /s/ Jill Andersen attorney-infact for Sara Cotter

05/23/2024

\*\* Signature of Reporting Person

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.