FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

**OMB APPROVAL** 3235-0287 Estimated average burden

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

## 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

1. Name and Address of Reporting Person* <u>Paula Molina Rene</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol Vaxxinity, Inc. [ VAXX ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last)	(Fir	,		3. Date of Earliest Transaction (Month/Day/Year) 11/03/2023								X		Officer (give title below)  See Re		Other (specify below) marks			
505 ODYSSEY WAY					4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person					
(Street) MERRIT ISLAND	HI.	3	32953													filed by Mo	•	J	
					Rul	e 10	)b5-	1(c)	Trans	sac	tion Indi	icati	on						
(City)	(Sta	ate) (Z	Zip)		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.														
		Table	I - No	n-Deriva	tive S	Secui	ities	Acq	uired,	Dis	posed of	, or I	3ene	ficiall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)						Exec if an	Deemed cution Date, y nth/Day/Year)				Disposed (	ies Acquired (A) Of (D) (Instr. 3, 4			5. Amo Securit Benefic Owned Report	ties cially Following	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				(11150: 4)
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 or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Executi if any	BA. Deemed Execution Date, f any Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A) (D)		Date Expiration Exercisable Date		Expiration Date	Title	Amo or Num of Shar	ber						

**Explanation of Responses:** 

## Remarks:

Mr. Paula Molina resigned effective November 3, 2023. His title was SVP, Legal & Business Affairs (General Counsel). As a result, Mr. Paula Molina is no longer subject to Section 16 of the Securities Exchange Act of 1934 in connection with his transactions in the equity securities of Vaxxinity, Inc. and, therefore, will no longer report any such transactions on Form 4 or Form 5.

/s/ Rene Paula Molina

11/03/2023

\*\* Signature of Reporting Person Date

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.