FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Machinatan | D C | 20540 |
|-------------|------|-------|
| Washington, | D.C. | 20049 |

| STATEMENT | OF CI | HANGES | IN BENE | EFICIAL | 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* Hu Mei Mei | | | 2. Issuer Name and Ticker or Trading Symbol Vaxxinity, Inc. [VAXX] | | | | (Che | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner | | | | | | | | |
|---|---|--|--|-----------------|---|--------------|--------------------------------|---|---|---|---|--|---|--|---------------------------------------|-----|
| (Last) | , | irst) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 03/07/2023 | | | | | |) | Officer (give title below) See Remarks Other (specify below) | | | | |
| C/O VAXXINITY, INC. 505 ODYSSEY WAY | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) MERRIT ISLAND | H) | L | 32953 | | Dula | 4055 | 4/-> | T | 4: 1 | 1:4: |) | | ed by More | • | ting Person One Report | - 1 |
| (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. | | | | | | | | o satisfy | | | |
| | | Та | ble I - Non | -Deriva | tive S | ecuritie | s Ac | quired, Di | isposed | of, or Be | neficially | Owned | | | | |
| Date | | | 2. Transa Date (Month/Da | Execution Date, | | Code (Instr. | | ed (A) or str. 3, 4 and 5 | 5. Amount Securities Beneficially Owned Foll Reported | | Form ly (D) or | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | Code V | Amoun | t (A) o | r Price | Transacti (Instr. 3 a | ction(s) | | " | | | |
| 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) | 3A. Deemed Execution Da if any (Month/Day/Y | Cod | ansaction Derivative ode (Instr. Securities | | e s i (A) sed str. | 6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4) | | ies g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | Cod | le V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | ,11(3) | | |
| Stock Option (right to buy) | \$2.29 | 03/07/2023 | | A | | 620,000 | | (1) | 03/07/2033 | Class A Common Stock | 620,000 | \$0.00 | 620,000 | 0 | D | |
| Stock Option (right to buy) | \$2.29 | 03/07/2023 | | A | | 73,928 | | (2) | 03/07/2033 | Class A Common Stock | 73,928 | \$0.00 | 73,928 | 3 | D | |

Explanation of Responses:

- 1. The options were issued to the Reporting Person pursuant to the Issuer's 2021 Omnibus Incentive Compensation Plan. Such options vest in 48 equal monthly installments beginning on March 7, 2023.
- 2. The options were issued to the Reporting Person pursuant to the Issuer's 2021 Omnibus Incentive Compensation Plan. Such options are fully vested upon issuance. This one-time option grant was made in lieu of an annual cash bonus payment to Ms. Hu.

Remarks:

Chief Executive Officer and President.

/s/ Rene Paula Molina as

04/05/2023 Attorney-in-Fact for Mei Mei

Hu

** 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.