FORM 4

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

Washington, D	.C. 20549
---------------	-----------

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

## OMB APPROVAL 3235-0287 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Estimated average burden hours per response: 0.5

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* Sinha Vikas					2. Issuer Name <b>and</b> Ticker or Trading Symbol Allovir, Inc. [ ALVR ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner						
(Last)	(Fi	,	, , ,				3. Date of Earliest Transaction (Month/Day/Year) 01/04/2024							X Officer (give title Other (specify below)  See Remarks					
1100 WINTER STREET					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) WALTH	AM M	A 0	2451											X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (Ž	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.														
		Table	I - N	on-Deriva	tive	Secui	rities	Ac	quire	d, Di	sposed of	f, or B	eneficia	lly Own	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y					Execution Date,					Acquired (A) or (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Ì	Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 01/04/202					24				<b>S</b> <sup>(1)</sup>		961	D	\$0.639	1,166	,788		D		
Common Stock														16,674	,766 <sup>(2)</sup>		I	Shares held by ElevateBio LLC	
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  (Instr. 3)  3. Transaction Date Execution Date, if any (Month/Day/Year)					Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			e and nt of ities lying ative ity (Instr. 4)	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitiv Benefici Owned Followir Reporte Transac (Instr. 4)	ve es ially ng d tion(s)	10. Owners Form: Direct (I or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares						

## **Explanation of Responses:**

- 1. Represents shares required to be sold by the Reporting Person to cover tax withholding obligations in connection with the vesting of restricted stock units. These sales were automatic and not in the discretion of the Reporting Person.
- 2. Shares held by ElevateBio. The Reporting Person is a director and Chief Financial Officer of ElevateBio, and may be deemed to have shared voting and investment power of the shares held by ElevateBio. The Reporting Person disclaims beneficial ownership of these securities except to the extent of his pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of all of the reported shares for purposes of Section 16 or for any other purpose.

## Remarks:

Officer Title: President and Chief Financial Officer

/s/ Brett Hagen, as Attorney-

01/08/2024

\*\* 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.