FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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1. Name and Add		F (2. Date of Event Requiring Stater Month/Day/Yea 02/11/2004	ment	3. Issuer Name and Ticker or Trading Symbol DYNAVAX TECHNOLOGIES CORP [DVAX]						
(Last) (First) (Middle) C/O DYNAVAX TECHNOLOGIES CORPORATION					Relationship of Reporting Person (Check all applicable) Director		10% Owne	r (Mo	5. If Amendment, Date of Original Filed (Month/Day/Year)		
717 POTTER STREET, SUITE 100					X Officer (give title Other below) Vice President			App	dividual or Joint/Group Filing (Check licable Line)		
(Street) BERKELEY CA 94710-2722										y One Reporting Person y More than One erson	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)				4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock					33,331		D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable and Expiration Date (Month/Day/Year)		d 3. Title and Amount of Securi Underlying Derivative Securit			4. Conversion or Exercise	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		
Stock Option (Right to Buy)		01/22/2003	01/22/2013	Commo	n Stock	50,000	1.5	D		
Stock Option (Right to Buy)		12/18/2003	12/18/2013	Commo	n Stock	8,333	3	D			
Stock Option (Right to Buy)		12/18/2003	12/18/2013	Commo	n Stock	11,666	3	D			
Stock Option (Right to Buy)		10/24/2000	10/24/2010	Commo	n Stock	33,333	3	D		

Explanation of Responses:

/s/ Stephen F. Tuck

02/11/2004

Date

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).