FORM 4

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

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHAI	NGES IN I	BENEFICIAL	OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
	Estimated average burde	en
	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

1. Name and Address of Reporting Person*  KISNER DANIEL L					2. Issuer Name and Ticker or Trading Symbol DYNAVAX TECHNOLOGIES CORP (Check all applicable)  5. Relationship of Reporting Person(s) to Issuer (Check all applicable)														
					DVAX ]								)	Directo	r		10% Ov	/ner	
(Last)	(F	irst)	(Middle)				,								Officer below)	(give title		Other (s below)	pecify
C/O DYNAVAX TECHNOLOGIES CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 10/13/2015														
2929 SEVENTH STREET, SUITE 100				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		led by One	Repo	orting Person	,
BERKELEY CA 94710												Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Date,		Date,	Transaction Disposed Code (Instr. 5)		ties Acquired (A) od d Of (D) (Instr. 3, 4 a				es Fo ally (D) Following (I)	Form (D) or	orm: Direct 0) or Indirect ) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
		-	Table II -								osed of, onvertil				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, 1	4. Transa Code ( 8)		of		6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisabl		Expiration Date	Title	or Nu of	umber					
Option (Right to Buy)	\$22.51	10/13/2015			A		13,200		(1)	1	0/12/2025	Commo	n 13	3,200	(2)	13,200	)	D	

## Explanation of Responses:

- 1. This option vests fully on October 13, 2016, the one year anniversary of the grant date.
- 2. Not applicable.

## Remarks:

<u>Daniel Kisner, M.D., by /s/</u> <u>Michael Ostrach, Attorney-in</u>

10/14/2015

Fact

\*\* 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.