SEC For	m 4 FORM	4	UNITED) STA	TES	S SI	ECUR	ITIE	S ANI	DE	ХСНА	NGE C	оммі	SSION					
		-					v	Vashing	gton, D.C	. 205	49					OMB	APPRO\	/AL	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See				NT	NT OF CHANGES IN BENEFICIAL OWNERS									OMB Number: 3235-0287 Estimated average burden hours per response: 0.5					
Instruc	tion 1(b).			File							es Exchan npany Act		934						
1. Name and Address of Reporting Person [*] CANO FRANCIS				<u>D</u>	2. Issuer Name and Ticker or Trading Symbol DYNAVAX TECHNOLOGIES CORP [DVAX]									cable) or	, 10% O		ner		
(Last) (First) (Middle) C/O DYNAVAX TECHNOLOGIES					3. Date of Earliest Transaction (Month/Day/Year) 05/23/2024									Officer (give title Other (spec below) below)				pecity	
2100 POWELL STREET, SUITE 720					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) EMERYVILLE CA 94608				F									Form f	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)		R			. ,			ion Ind								
											ns of Rule 1			act, instruction 10.	n or written	plan th	at is intended	to	
		Tab	le I - Nor	n-Deriv	ative	e Se	curities	s Acc	quired,	Dis	posed o	f, or Be	neficial	y Owned					
Da				Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Di Code (Instr. 5)			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			es ally Following	Form (D) or	Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock ⁽¹⁾			05/23	05/23/2024				Α		5,357	' A	\$ <u>0</u>	36	,905		D			
Common Stock			05/24	05/24/2024				М		7,500		\$5.9	\$5.9 44,			D			
Common Stock			05/24	05/24/2024				F		3,885 ⁽²⁾ D		\$11.3	39 40,520		D				
		-	Table II -								osed of, onvertil			Owned					
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Executio ecurity or Exercise (Month/Day/Year) if any		3A. Deemed Execution I	d 4 Date, T	4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercisa Expiration Date (Month/Day/Year		able and	7. Title an of Securit Underlyin Derivative (Instr. 3 an	d Amount ies g Security	8. Price of Derivative Security (Instr. 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)	
				c	ode	v	(A)		Date Exercisat		Expiration Date	Title	Amount or Number of Shares						
Stock Option (Right to Buy)	\$11.79	05/23/2024			Α		22,500		(3)	()5/22/2031	Common Stock	22,500	\$0	22,50	0	D		
Stock Option (Right to Buy)	\$5.9	05/24/2024			м		7,500		(3)	(06/01/2024	Common Stock	7,500	\$0	0		D		
Explanatio	n of Respons	ses:																	

1. These securities are restricted stock units ("RSUs"). Each RSU represents a contingent right to receive one share of DVAX Common Stock. The RSU will fully vest one year from the date of grant, provided that Reporting Person continues to provide services to the Company through such vesting date. The release of RSU shares shall be mandatorily deferred six months and one day after the Reporting Person no longer provides services to the Company.

2. Represents the number of shares withheld to cover option exercise cost.

3. This option grant fully vests and becomes exercisable one year from date of grant, provided that Reporting Person continues to provide services to the Company through such vesting date.

Francis C	ano, by /s/ Trevor
Dutcher,	Attorney-in-Fact

05/28/2024

Date

** Signature of Reporting Person

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.