FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

	OMB APPROVAL								
	OMB Number: 3235-0104 Estimated average burden								
	hours per response	e: 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*  Gray Eddie  (Month/Day/Year)  05/01/2013			nent	3. Issuer Name and Ticker or Trading Symbol  DYNAVAX TECHNOLOGIES CORP [ DVAX ]								
(Last) 2929 SEVEN	(First) TH STREET	(Middle)			4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				5. If Amendment, Date of Original Filed (Month/Day/Year)			
SUITE 100					X	Officer (give title below)	below)		6. Individual or Joint/Group Filing (Check Applicable Line)			
(Street) BERKELEY	CA	94710				CEO and Dire	ctor		X		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)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common stock						0	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 a Expiration Date (Month/Day/Year)			ate	3. Title and Amount of Secur Underlying Derivative Secur		ty (Instr. 4) Conve		rcise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiratio Date	n Title	•	Amount or Number of Shares	Price of Deriva	tive	Direct (D) or Indirect (I) (Instr. 5)		

**Explanation of Responses:** 

Eddie Gray by /s/ Jennifer
Lew, Attorney-in-Fact

05/03/2013

\*\* 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 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).

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.