Edgar Filing: OSTRACH MICHAEL S - Form 4

OSTRACH M	ICHAEL S									
Form 4										
March 22, 201	8									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL		
. •	• UNITED	STATES					COMMISSIO	OND	3235-0287	
Check this	box		VV a	shington	, D.C. 20	1549		Number:	January 31,	
if no longer	if no longer stratement of CHANGES IN BENEFICIAL OWNERSHIP OF					Expires:	2005			
subject to Section 16.		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated	0		
Form 4 or		SECONTIES					burden hor response	•		
Form 5	Filed pu	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								
obligations may contin	Section 17	(a) of the	Public U	Itility Hol	ding Cor	npany Act	of 1935 or Section	on		
See Instruct		30(h)	of the In	nvestment	Compar	ny Act of 1	940			
1(b).										
(Drint on Type De										
(Print or Type Re	sponses)									
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relation					5. Relationship of	p of Reporting Person(s) to				
OSTRACH MICHAEL S			Symbol				Issuer			
			DYNAVAX TECHNOLOGIES							
				[DVAX]			(Che	eck all applicabl	le)	
(Last)	(First)	(Middle)	3. Date of	of Earliest T	ransaction		Director	109	% Owner	
			(Month/	Day/Year)			XOfficer (give titleOther (specify below)			
C/O DYNAV			03/21/2	2018			below) Seni	ior Vice Preside	ent	
	GIES, 2929 SE	EVENTH								
STREET, SU	ITE 100									
			4. If Am	4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
			Filed(Mo	onth/Day/Yea	r)		Applicable Line) _X_ Form filed by One Reporting Person			
DEDVELEV	CA 04710							More than One R		
BERKELEY,	CA 94/10						Person		1 0	
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	ally Owned	
1.Title of 2.	Transaction Date	2A. Deem	ed	3.	4. Securit	ies	5. Amount of	6. Ownership	7. Nature of	
Security (M	/Ionth/Day/Year)	Execution	Date, if	Transactio	nAcquired	(A) or	Securities	Form: Direct	Indirect	
(Instr. 3)		any (Manth /D	(N /)	Code	Disposed			(D) or Indirect		
		(Month/D	ay/Year)	(Instr. 8)	(Instr. 3, 4	4 and 5)		(I) (Instr. 4)	Ownership (Instr. 4)	
						(A)	Reported			
						(A) or	Transaction(s)			
				Code V	Amount	(D) Price	(Instr. 3 and 4)			
Reminder: Repor	t on a separate lin	e for each cl	ass of sec	urities benef	ficially ow	ned directly o	or indirectly			
i i i i i i i i i i i i i i i i i i i	a separate ini	- 101 04011 01								

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

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1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. Number of iorDerivative Securities Acquired (A) Disposed of ((Instr. 3, 4, an 5)	Expiration I (Month/Day or D)	Date	7. Title and 2 Underlying 3 (Instr. 3 and	Securities
				Code V	7 (A) ((D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 18.4	03/21/2018		А	150,000	<u>(1)</u>	03/20/2025	Common Stock	150,000
Reporting Owners									
Reporting Owner Name / Address				R	elationships				
Reporting Owner IV		Tunic / Truit C55	Director 10%	Owner	Officer	O	ther		
C/O DY 2929 SE		CHNOLOGIES REET, SUITE 100)	Senior Vice President					
Sign	atures								

Signatures

/s/ Michael	
Ostrach	03/22/2018
<u>**</u> Signature of Reporting Person	Date

Explanation of Responses:

* 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). **

(1) 50% of this option grant will vest on the second anniversary of the grant date and 50% will vest on the third anniversary of the grant date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.