#### **COFFMAN ROBERT**

Form 4

February 02, 2012

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB

**OMB APPROVAL** 

Number:

3235-0287

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January 31, 2005

0.5

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response...

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue.

See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \*

**COFFMAN ROBERT** 

2. Issuer Name and Ticker or Trading

Symbol

DYNAVAX TECHNOLOGIES CORP [DVAX]

(Month/Day/Year) 01/31/2012

3. Date of Earliest Transaction Director 10% Owner X\_ Officer (give title Other (specify

Issuer

below) Chief Scientific Officer & VP

C/O DYNAVAX TECHNOLOGIES, 2929 SEVENTH

(First)

(Middle)

STREET, SUITE 100

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

5. Relationship of Reporting Person(s) to

(Check all applicable)

BERKELEY, CA 94710

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (Instr. 4) (Instr. 4)

Reported (A) Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exerc	cisable and	7. Title and A	Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactiorDerivative		Expiration Date		Underlying Securities	
Security	or Exercise		any	Code	Securities	(Month/Day/Year)		(Instr. 3 and	4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (A) or				
	Derivative				Disposed of (D)				
	Security				(Instr. 3, 4, and				
				5)					
					-,				
				Code V	(A) (D)	Date	Expiration	Title	Amount or
						Exercisable	Date		Number of
									Shares
o .:									
•								Common	
(Right to	\$ 3.48	01/31/2012		A	180,000	(1)	01/30/2022		180,000
Buy)								Stock	
Option (Right to Buy)	Security \$ 3.48	01/31/2012		Code V	5)		Expiration Date 01/30/2022	Title  Common Stock	Number Shares

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

COFFMAN ROBERT C/O DYNAVAX TECHNOLOGIES 2929 SEVENTH STREET, SUITE 100 BERKELEY, CA 94710

Chief Scientific Officer & VP

### **Signatures**

Robert Coffman, by /s/ Jennifer Lew, Attorney-in Fact

02/02/2012

\*\*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).
- This option grant shall vest over four (4) years with one fourth (1/4) of the Shares subject to the Option vesting twelve months after the (1) Vesting Commencement Date, and one forty-eighth (1/48) of the Shares subject to the Option vesting on the last day of each month thereafter.
- (2) Not applicable.

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.

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