#### Edgar Filing: DYNAVAX TECHNOLOGIES CORP - Form 3

DYNAVAX TECHNOLOGIES CORP Form 3 July 08, 2013 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

#### OMB APPROVAL

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(Print or Type Responses)

| 1. Name and Address of Reporting<br>Person <u>*</u><br>RICCIARDI NATALE S   | <ol> <li>Date of Event Requiring<br/>Statement<br/>(Month/Day/Year)</li> </ol> | 3. Issuer Name and Ticker or Trading Symbol<br>DYNAVAX TECHNOLOGIES CORP [DVAX] |  |   |  |
|---|--|---|--|---|--|
| (Last) (First) (Middle)   | 07/03/2013   | 4. Relationshi<br>Person(s) to Is   | p of Reporting<br>ssuer  | 5. If Amendment, Date Original Filed(Month/Day/Year)        |  |
| C/O DYNAVAX<br>TECHNOLOGIES, 2929<br>SEVENTH STREET, SUITE 100<br>(Street)  |  | X_ Director<br>Officer  | all applicable)<br>10%<br>0//<br>0//<br>v) (specify below)                 | Owner<br>6. Individual or Joint/Group                       |  |
| BERKELEY, CA 94710  |  |   |  | Person<br>Form filed by More than One<br>Reporting Person   |  |
| (City) (State) (Zip)  | Table I - I  | Non-Derivat   | ive Securiti   | es Beneficially Owned                                       |  |
| 1.Title of Security<br>(Instr. 4)   | 2. Amount of<br>Beneficially<br>(Instr. 4)                                     |   | 3.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I)<br>(Instr. 5) | 4. Nature of Indirect Beneficial<br>Ownership<br>(Instr. 5) |  |
| Common Stock  | 0  |   | D  | Â   |  |
| Reminder: Report on a separate line for ea<br>owned directly or indirectly.   | ach class of securities benefic  | cially S  | EC 1473 (7-02  | )   |  |
| Persons who respond to the collection of<br>information contained in this form are not<br>required to respond unless the form displays a<br>currently valid OMB control number. |  |   |  |   |  |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)  |  |   |  |   |  |

| 1. Title of Derivative Security<br>(Instr. 4) | 2. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) | 3. Title and Amount of<br>Securities Underlying<br>Derivative Security<br>(Instr. 4) | 4.<br>Conversion<br>or Exercise<br>Price of | 5.<br>Ownership<br>Form of<br>Derivative | 6. Nature of Indirect<br>Beneficial Ownership<br>(Instr. 5) |
|---|--|--|---|--|---|
|   |  | (Instr. 4)   | Price of<br>Derivative                      | Derivative<br>Security:                  |   |

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| Date        | Expiration | Title | Amount or | Security | Direct (D)  |
|-------------|------------|-------|-----------|----------|-------------|
| Exercisable | Date       |       | Number of |          | or Indirect |
|             |            |       | Shares    |          | (I)         |
|             |            |       |           |          | (Instr. 5)  |

# **Reporting Owners**

| Reporting Owner Name / Address   | Relationships |           |         |       |  |  |
|--|---------------|-----------|---------|-------|--|--|
|  | Director      | 10% Owner | Officer | Other |  |  |
| RICCIARDI NATALE S<br>C/O DYNAVAX TECHNOLOGIES<br>2929 SEVENTH STREET, SUITE 100<br>BERKELEY, CA 94710 | ÂX            | Â         | Â       | Â     |  |  |
| Signatures   |               |           |         |       |  |  |
| Natale Ricciardi by /s/ Jennifer Lew,<br>Attorney-in-Fact  |               | 07.       | /08/201 | 3     |  |  |
| **Signature of Reporting Person  |               |           | Date    |       |  |  |
| Evalenction of Decanonace  |               |           |         |       |  |  |

## **Explanation of Responses:**

\* 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. 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.