FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* GUGGENHIME ANDREW						2. Issuer Name and Ticker or Trading Symbol Vaxcyte, Inc. [PCVX]									(Ch	eck all appli Directo	cable)	10% Ov		vner
	(F KCYTE, IN TCH DRIVI	C.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/18/2021										below) President and CFO				
(Street) FOSTER (City)	CCITY C.	tate)	94404 (Zip)	n Dariy	-	If Amendment, Date of Original Filed (Month/Day/Year) tive Securities Acquired, Disposed of, or Beneficence.								Line	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ar) i	2A. Deemed Execution Date,		<u>.</u> , [3. Transact	ransaction Di ode (Instr. 5)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amou Securiti Benefic Owned	Amount of ecurities eneficially wned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount (A) or (D)		Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common	Stock			11/18/						М		3,100)	A	\$5.35	6,2	25(1)		D	
Common	Stock			11/18	3/2021				S ⁽²⁾			2,985	5	D	\$24.5	3,240(1)			D	
Common	Stock			11/18	3/2021	2021			S ⁽²⁾		115	D \$2		\$25.20	(4) 3,1	.25(1)		D		
		Т	able II -									osed of onverti				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)				Exp	6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity 4)	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	Code V		(D)	Dat Exe	te ercisable		xpiration ate	Title	0 0	lumber					
Stock Option (right to	\$5.35	11/18/2021			М			3,100		(5)	0	5/11/2030	Comn		3,100	\$0.00	521,51	8	D	

Explanation of Responses:

- 1. Includes shares acquired under the Vaxcyte, Inc. employee stock purchase plan on November 17, 2020 of 1,562 shares and May 17, 2021 of 1,563 shares.
- 2. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan.
- 3. The price reported is a weighted-average price. The shares were sold at prices ranging from \$24.04 to \$24.86. The reporting person will provide upon request to the SEC, the issuer or security holder of the issuer, full information regarding the number of shares sold at each separate price.
- 4. The price reported is a weighted-average price. The shares were sold at prices ranging from \$25.08 to \$25.28. The reporting person will provide upon request to the SEC, the issuer or security holder of the issuer, full information regarding the number of shares sold at each separate price.
- $5.\,1/4$ of the shares subject to the option vested on May 1, 2021, and 1/48 of the shares vest monthly thereafter.

Remarks:

/s/ Ron Metzger, Attorney-in-Fact

11/22/2021

** Signature of Reporting Person Date

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.