SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| OMB | APPROVAL | |
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| Estimated average burden | | | | | | | | | |
| hours per response | : 0.5 | | | | | | | | |

| | | | 2. Issuer Name and Ticker or Trading Symbol <u>Vaxcyte, Inc.</u> [PCVX] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|---------------|----------------|--|--|---|--|--|--|--|
| (Last) (First) (Middle) C/O VAXCYTE, INC. 825 INDUSTRIAL ROAD, STE. 300 | | (| 3. Date of Earliest Transaction (Month/Day/Year) 09/02/2022 | X X | Director Officer (give title below) Chief Executive | 10% Owner Other (specify below) Officer | | | |
| (Street) SAN CARLOS (City) | CA (State) | 94070 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | idual or Joint/Group Filing Form filed by One Rep Form filed by More that Person | orting Person | | | |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Ownership |
|---------------------------------|--|---|---|---|--------|---------------|---------|---|---|--|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 09/02/2022 | | F ⁽¹⁾ | | 8,910 | D | \$26.38 | 663,546 | D | |
| Common Stock | | | | | | | | 162,830 | Ι | By Children's Trust ⁽²⁾ |
| Common Stock | | | | | | | | 162,830 | Ι | By Children's Trust ⁽³⁾ |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | (c.g., puis, cais, warants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
|---|---|--|---|------------------------------|---|--|--|---------------------|--------------------|-------|---|--|-------------|--|---|--|--|--|--|
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) o Dispe of (D | erivative ecurities cquired A) or isposed f (D) nstr. 3, 4 | | Expiration Date | | Expiration Date A (Month/Day/Year) S U U S S | | e Amount of | | Amount of Becurities Duderlying Derivative Becurity (Instr. and 4) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | | | |

Explanation of Responses:

1. Represents shares surrendered to the Issuer to cover applicable tax withholding obligations realized upon the vesting of restricted stock units.

2. Shares are held directly by a trust for the benefit of the Reporting Person's daughter.

3. Shares are held directly by a trust for the benefit of the Reporting Person's son.

Remarks:

<u>Grant Pickering, by /s/ Ron A.</u> <u>Metzger, Attorney-in-Fact</u> 09/07/2022

** 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.