FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasiliigion,	D.C.	20040

STATEMENT	OF CHAN	IGES IN BE	NEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response:	0.5								

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* <u>GUGGENHIME ANDREW</u>						2. Issuer Name and Ticker or Trading Symbol Vaxcyte, Inc. [PCVX]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last)	(F XCYTE, IN	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/30/2022								below)	give title President	e Other (sp below) ent and CFO		pecify		
825 INDUSTRIAL ROAD, STE. 300						4 If Amendment Date of Original Filed (Marsh Do. 26 c.)							6 Inc	6. Individual or Joint/Group Filing (Check Applicable						
(Street) SAN CA	RLOS C	'A	94070		_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line)	X Form filed by More than One Reporting Person Person								
(City)	(5	State)	(Zip)																	
		Ta	ıble I - Noı	n-Deri	ivati	ve S	ecuritie	es Acq	uired,	Dis	posed of	, or Ben	eficially	Owned						
Dat			2. Tran Date (Month		Exec Day/Year) if an		2A. Deemed Execution Date, If any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Disposed Of				Beneficia Owned Fo	lly	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	Amount (A) or (D)		Reported Transacti (Instr. 3 a				(Instr. 4)			
Common Stock			12/3	30/20	0/2022			M		23,691 A S		\$5.35	61,229			D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Dat		Date Execut (Month/Day/Year) if any	3A. Deemed Execution Da if any (Month/Day/		ransaction code (Instr.)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)		te	of Securities		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e Own Form ally Director In (I) (II)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares		Transacti (Instr. 4)	on(s)				
Stock Option (right to buy)	\$47.95	12/30/2022			Α		42,000		(1)		12/30/2032	Common Stock	42,000	\$0.00	42,00	0	D			
Stock Option (right to buy)	\$5.35	12/30/2022			M			23,691	(2)		05/11/2030	Common Stock	23,691	\$0.00	430,82	27	D			

Explanation of Responses:

- 1. 1/48 of shares subject to the option vest on January 30, 2023, and 1/48 of the shares vest monthly thereafter, subject to Reporting Person's continuous service with the Issuer through each such date.
- 2. 1/4 of the shares subject to the option vested on May 1, 2021, and 1/48 of the shares vest monthly thereafter, subject to Reporting Person's continuous service with the Issuer through each such date.

Remarks:

Andrew Guggenhime, by /s/ Ron A. Metzger, Attorney-in-

01/04/2023

Fact

** 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.