FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasimigton,	D.C.	20040

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours ner resnonse.	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

Name and Address of Reporting Person* Fairman Jeff				2. Issuer Name and Ticker or Trading Symbol Vaxcyte, Inc. [PCVX]									5. Relationship of Repo (Check all applicable) Director X Officer (give ti			10% Other (er			
	(Fi KCYTE, IN CH DRIVI	C.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/26/2021								VP, Research							
(Street) FOSTER CITY CA 94404					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Appl Line) X Form filed by One Reporting Person Form filed by More than One Reporting															
(City)	(Si	tate) ((Zip)												Persor	1					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Beneficially Owned Foll		ly	Form: I (D) or I	orm: Direct D) or Indirect I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
						Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Insti	r. 4)				
Common Stock 03/26/20		2021				M		4,750	A	\$0.0)4	6,15	58	I)						
Common Stock		03/26/2021				S ⁽¹⁾		3,389	D	\$23.6	4 ⁽²⁾	2,769		D							
Common Stock 03/26/2		2021	21			S ⁽¹⁾		1,361	D	\$24.4	8 (3)	1,408		D							
Common Stock													341,2	227]	I	By Fair Fam Trus	·			
Common Stock													50,000		I		By AF 2020 Irrevocable Trust				
		Т	able I								posed of, , converti				Owned						
1. Title of 2. 3. Transaction Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) If any				4. Transa	ransaction of ode (Instr. Derivativ		vative urities uired or loosed o)		Exerc	cisable and	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ve ies ially ng ed ction(s)	Owners Form: Direct (or Indirect) (I) (Insti		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	V (A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	oer								
Stock Option (right to buy)	\$0.04	03/26/2021			M			4,750	(4)		04/23/2025	Common Stock	4,75	50	\$0.00 7,2		59 D				

Explanation of Responses:

- 1. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan.
- 2. The price reported is a weighted-average price. The shares were sold at prices ranging from \$23.125 to \$24.04. 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.
- 3. The price reported is a weighted-average price. The shares were sold at prices ranging from \$24.15 to \$24.77. 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 shares subject to the option are fully vested and exercisable.

Remarks:

/s/ Winston Macaraeg, Attorney-in-Fact

03/29/2021

** 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.