| SEC Form 4 |
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Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| | | | of Section 30(n) of the investment Company Act of 1940 | | | | | | |
|--|---|---------|--|-------------------|--|--------------------------|--|--|--|
| 1. Name and Add Phillips And | ress of Reporting F ne M. | Person* | 2. Issuer Name and Ticker or Trading Symbol <u>Vaccitech plc</u> [VACC] | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| BLDG | (Last) (First) (Middle) C/O VACCITECH PLC, THE SCHRODINGER BLDG | | 3. Date of Earliest Transaction (Month/Day/Year) 05/04/2021 | | Officer (give title below) | Other (specify below) | | | |
| HEATLEY ROAD, THE OXFORD SCIENCE PARK | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | vidual or Joint/Group Fil Form filed by One Re | | | | |
| (0) ==== | | | | | Form med by One Re | eporting Person | | | |
| (Street) OXFORD, | X0 | 0X4 4GE | | | Form filed by More the Person | nan One Reporting | | | |
| (City) | (State) | (Zip) | | | | | | | |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | if any | Transaction Code (Instr. | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
|---------------------------------|--|--------|-----------------------------|--|--------|---------------|---------------------|---|---|---|--|
| | | | Code V | | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | |
| Ordinary Shares ⁽¹⁾ | 05/04/2021 | | Р | | 3,000 | Α | \$ <mark>1</mark> 7 | 3,000 | D | | |

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, 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) | | 5. Number 6. Date Exercisable and of Expiration Date (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 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. The Ordinary Shares may be represented by American Depositary Shares, each of which currently represents one Ordinary Share.

| /s/ | W | ïlliam | Enright, | Attorney- | 05/06/2021 |
|-----|---|--------|----------|-----------|------------|
| • | - | | | | 05/06/2021 |

<u>in-Fact</u>

** 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.