## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)  1. Name and Address of Reporting Person* SMITH LAWRENCE RUSSELL			2. Issuer Name and Ticker or Trading Symbol VICAL INC [VICL]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) (First) (Middle) 10390 PACIFIC CENTER COURT				3. Date of Earliest Transaction (Month/Day/Year) 04/13/2015						X Officer (give title below) Other (specify below)  VP, Vaccine Research				
(Street) SAN DIEGO, CA 92121				4. If Amendment, Date Original Filed(Month/Day/Year)				r)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City	(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					es Acqui	lired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		(Instr. 8)		4. Securities Acquired (A) or Disposed of (I) (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	nt of Securities ally Owned Following I Transaction(s)		Form:	7. Nature of Indirect Beneficial	
				(Month/Day/Yea	Code	V	Amount	(A) or (D)	Price	(IIISIF. 3 &	or Ir (I)			Ownership (Instr. 4)
	ommon Stock \$.01 par alue		04/13/2015		S <sup>(1)</sup>		974	D (	\$ 0.9335 (2)	244,003 <sup>(3)</sup>		D		
	Report on a s	separate line t	for each class of secu	rities beneficially	owned dire	Per	sons wh	o respo			ction of inf			1474 (9-02)
	Report on a s	separate line t	Table II -	Derivative Secu	rities Acqui	Per cor the	rsons who tained in form dis	no responding this for this for the splays and the splays are so that the splays are spl	orm are a curren	not requesting ntly valid	uired to res	formation spond unle trol numbe	ss	1474 (9-02)
1. Title of	2.	3. Transaction Date (Month/Day	Table II -  on 3A. Deemed Execution D.  //Year) any	Derivative Secu	rities Acqui	Per cor the fred, I and (M	rsons who tained in form dis	no responding the splays a configuration of the second cisable on Date	eneficial eurities) 7. Ti Amo Undo Secu	not requesting ntly valid	OMB conf	spond unle	of 10. Ownersi Form of Derivati Security Direct (i or Indire	11. Nat of Indir Benefic Owners : (Instr. 4

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SMITH LAWRENCE RUSSELL 10390 PACIFIC CENTER COURT SAN DIEGO, CA 92121			VP, Vaccine Research			

## Signatures

Sandy Medina (via Power of Attorney)	04/15/2015
**Signature of Reporting Person	Date

### **Explanation of Responses:**

- \* 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).
- (1) Sale of 974 shares of common stock to cover withholding taxes on restricted stock units released. The sale was affected by a broker pursuant to instructions set forth in a Rule 10b5-1 plan adopted by the Reporting Person and delivered to the broker on February 26, 2015.
- (2) Represents a weighted average sales price per share. The prices actually received ranged from \$0.93 to \$0.9461. The Reporting Person has provided to the issuer, and will provide to any security holder of the issuer or the SEC staff, upon request, information regarding the number of shares sold at each price within the range.
- (3) This balance includes 132,631 unvested shares subject to restricted stock units.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.