SEC For	m 4																				
FORM 4 UN			UNITED	INITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549														OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).					EMENT OF CHANGES IN BENEFICIAL OWNERSH Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934														3235-0287		
1. Name and Address of Reporting Person* Evans Elizabeth E.					2.											Relationship of Reporting Person(s) to Issuer neck all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O VACCINEX, INC. 1895 MOUNT HOPE AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 04/01/2022									X Officer (give title Other (specify below) below) Chief Operating Officer						
(Street) ROCHESTER NY 14620					_ 4.1	Line) X Form file										oint/Group Filing (Check Applicable led by One Reporting Person led by More than One Reporting					
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3)				2. Transactio Date (Month/Day/		n	2A. Deemed Execution Date, if any (Month/Day/Yea		e, 3. Transa Code (ction	4. Securi	ities Acquired (A) d Of (D) (Instr. 3,		or	5. Amour Securitie Beneficia Owned F Reported	int of 6. O es Fori ially (D) Following (I) (I d		: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock									Code	v	Amount	(A) ((D)	Pr Pr	rice		9,600		D			
		-	Table II - I												Owned			I			
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Date Security 3. Conversion (Month/Day/Year) 3. Transaction I fany (Month/Day/Year) 3. Date Security (Month/Day/Year) 3. Security 3.			i Date,	ate, 4. Transacti Code (Ins		5. Number on of		S, OptionS, Conver 6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ount	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)	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		xpiration Date	Title	Amo or Num of Shai	ber							
Stock Option (Right to Buy)	\$7.1								(1)	1	2/22/2025	Common Stock	9,6	510		9,610		D			
Stock Option (Right to Buy)	\$7.1								(1)	1	2/23/2025	Common Stock	8,6	05		8,605		D			
Stock Option (Right to Buy)	\$3.9								(2)	0	3/14/2029	Common Stock	12,4	400		12,400	0	D			
Stock Option (Right to Buy)	\$3.82								(3)	0	4/04/2030	Common Stock	10,0	000		10,000	D	D			
Stock Option (Right to Buy)	\$2.93								(4)	0	4/03/2031	Common Stock	8,0	00		8,000		D			
Stock Option (Right to Buy)	\$1.29	04/01/2022			A		20,000		(5)	0	4/01/2032	Common Stock	20,0	000	\$0	20,000)	D			

Explanation of Responses:

1. This option is fully exercisable as of the date of this report.

2. This option has vested with respect to 9,300 shares and the remainder vests on March 15, 2023.

3. This option has vested with respect to 5,000 shares and the remainder vests in two equal annual installments beginning on April 3, 2023.

4. This option vests one-fourth on each of the first four anniversaries of the April 2, 2021 grant date.

5. This option was granted under the Company's 2018 Omnibus Incentive Plan in a transaction exempt under Rule 16b-3 and, except as otherwise provided in the award notice, vests one-fourth on each of the first four anniversaries of the April 1, 2022 grant date.

/s/ Scott E. Royer, Attorney-in-04/04/2022

Fact for Elizabeth E. Evans

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 \ast 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.