FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| 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

| 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 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Newcomer Lee Nisley | | | | | 2. Issuer Name and Ticker or Trading Symbol MYRIAD GENETICS INC [MYGN] | | | | | | | | | k all app | ionship of Reporting all applicable) Director | | on(s) to Is | | |
|--|---|---------|--------------|---|--|---|--------|--|-----------------|---|--------------------|------------------|--|--|---|---|--|--------|--|
| (Last) | (Fir | st) (N | /liddle) | | 3. Date of Earliest Transaction (Month/Day/Year) 05/13/2024 | | | | | | | | | Office below | er (give title | | Other (s below) | pecify | |
| 322 NORTH 2200 WEST | | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Ind Line) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) SALT LA | AKE UI | 8 | 4116 | | | | | | | | | | | | filed by Mo | led by One Reporting Person led by More than One Reporting | | | |
| (City) | (St | ate) (Z | Z ip) | | $ _{\square}$ | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secu | rities | Acq | uired | , Dis | posed of | , or B | ene | ficially | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Date) | | | | | Exec if any | Deemed cution Date, y nth/Day/Year) | | 3. 4. Securitie Disposed C Code (Instr. 8) | | es Acquired (A) o Of (D) (Instr. 3, 4 | | A) or , 4 and | | ties cially Following | Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | Code | v | Amount | (A) or (D) | | rice | Transa | Reported Transaction(s) (Instr. 3 and 4) | | | (111511.4) | | | |
| Common Stock 05/13/2 | | | | | 2024 | | | S | | 6,200 | D | \$ | 325.3 ⁽¹⁾ | 60 | 66,650 | |) | | |
| | | Tal | | | | | | | | | osed of, convertib | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | vative Conversion Date Execution Date (Month/Day/Year) if any | | ion Date, | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | De Se (In | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y Ov Fo Dii or (I) | wnership orm: rect (D) Indirect (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercis | sable | Expiration Date | Title | Amou or Numb of Share | ber | | | | | |

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$25.30 to \$25.39, inclusive. The Reporting Person undertakes to provide to Myriad Genetics, Inc., any security holder of Myriad Genetics, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

Remarks:

By: Justin Hunter For: Lee

** Signature of Reporting Person

05/15/2024

Nisley Newcomer

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.