FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C. 20549	

STATEMENT	OF CH	ANGES I	N BENER	FICIAL (	OWNERSHI	P

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per respons	e: 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

1. Name and Address of Reporting Person* <u>DIAZ PAUL J</u>				2. Issuer Name and Ticker or Trading Symbol  MYRIAD GENETICS INC [ MYGN ]						5. Relationship (Check all app X Direct		licable) tor	ng Pe	10% Ov	vner				
(Last) 320 WAI	(F KARA WA	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/24/2023								X	Office below	,	Other (speci below) t and CEO		specify
(Street) SALT LA	AKE U	Г 8	4108		4. If <i>I</i>	Amend	ment, I	Date o	f Origin	Original Filed (Month/Day/Year)					Form	or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son			
(City)	(S	tate) (2	Zip)		$ _{\Box}$	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 in satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									an that is inter	nded to			
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired	, Dis	posed of	, or B	enef	iciall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			y/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Dispos		Transaction Disposed Of (D Code (Instr. 5)			s Acquired (A) or f (D) (Instr. 3, 4 an			5. Amo Securit Benefic Owned Report	ies ially Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Amount	(A) c (D)	Pr	ice	Transa	ransaction(s) Instr. 3 and 4)			(111501. 4)						
Common	Stock			03/24/2	2023		F <sup>(1)</sup>		18,428	D \$2		23.72	72 1,245,628		D				
Common Stock 03/24/2				2023			F <sup>(2)</sup>		26,997	D	\$2	23.72	2 1,218,631			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)	if any	emed ion Date, n/Day/Year)	4. Transaction Code (Instr. 8)		5. Nu of Deriv Secul Acqu (A) or Dispo of (D) (Instrand 5	rities ired sed . 3, 4			ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)  Amoun or Numbo of Title Shares		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

- 1. Represents shares withheld by the Company to satisfy tax withholding obligations in connection with the vesting of restricted stock units granted to the reporting person. The number of shares of Myriad common stock withheld was determined based on the closing price of Myriad common stock on March 24, 2023.
- 2. Represents shares withheld by the Company to satisfy tax withholding obligations in connection with the vesting of performance-based restricted stock units granted to the reporting person. The number of shares of Myriad common stock withheld was determined based on the closing price of Myriad common stock on March 24, 2023.

## Remarks:

By: Justin Hunter For: Paul J. Diaz

\*\* 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.