FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C. 20549
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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

OMB APPROVAL 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* Muzzey Dale					2. Issuer Name and Ticker or Trading Symbol MYRIAD GENETICS INC [MYGN]										ck all app Direc	licable) tor	ng Pe	rson(s) to Is	vner
(Last) 322 NOF	(Fir RTH 2200 V	,	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 03/14/2024									X	below	er (give title /) Chief Scier	ntific	Other (s below)	вреспу
(Street) SALT LA	AKE UI	. 8	4116		4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Ind Line)	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				on
(City)	(Sta	ate) (Z	Zip)		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.										nded to				
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired	, Dis	posed of	, or B	Bene	ficial	ly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					y/Year) Exec		Deemed cution Date, ly nth/Day/Year)		Transaction Disposed Code (Instr. 5)			es Acquired (A) Of (D) (Instr. 3, 4			Securit Benefic	. Amount of securities seneficially owned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	Amount	(A) (D)	or P	rice	Transa	action(s) 3 and 4)			(III3ti. 4)			
Common	Stock		03/14/2024 A ⁽¹⁾ 49,250 A \$0 116,723							D									
Common	Common Stock 03/15/2					2024			F ⁽²⁾		3,322	D	\$	S21.16	11	113,401		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)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any				Transaction of Code (Instr. 8) Sect Acquired (A) of Disp of (E		osed) r. 3, 4	6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		str.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Over Section 1	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V ((A)	(D)	Date Exercis	able	Expiration Date	Numb of Title Share							

Explanation of Responses:

- 1. Consists of time-based restricted stock units granted pursuant to the Company's 2017 Employee, Director and Consultant Equity Incentive Plan. Each restricted stock unit represents a contingent right to receive one share of the Company's common stock and vests in three equal annual installments beginning on the first anniversary of the grant date.
- 2. 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 15, 2024.

Remarks:

By: Justin Hunter For: Dale Muzzey

03/18/2024

** 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.