SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 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

1. Name and Address of Reporting Person [*] Haas Kevin Richard		Person*	2. Issuer Name and Ticker or Trading Symbol <u>MYRIAD GENETICS INC</u> [MYGN]		ationship of Reporting Pe (all applicable) Director	10% Owner				
(Last) 322 NORTH 22	(First) (Middle) 200 WEST		3. Date of Earliest Transaction (Month/Day/Year) 03/14/2024	X	Officer (give title below) Chief Technolog	Other (specify below) gy Officer				
			4. If Amendment, Date of Original Filed (Month/Day/Year)	al Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Ap Line)						
(Street)				X	Form filed by One Re	porting Person				
SALT LAKE CITY	UT	84116			Form filed by More the Person	an One Reporting				
(City)	(State)	(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.							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Disposed Of 5)			Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)		
Common Stock	03/14/2024		A ⁽¹⁾		35,178	Α	\$ <u>0</u>	139,978	D	
Common Stock	03/15/2024		F ⁽²⁾		3,306	D	\$21.16	136,672	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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 (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

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: Kevin

Richard Haas

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.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).