(City)

FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

| | OMB Number: | MB Number: 3235-0287 | | | | | | |
|---|--------------------------|----------------------|--|--|--|--|--|--|
| | Estimated average burden | | | | | | | |
| l | hours per response: | 0.5 | | | | | | |

| obligations may continu Instruction 1(b). | ue. See | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | hours per response: | 0.5 | |
|---|---------|--|--|-----------------------------------|------------------------|--|
| 1. Name and Address of Reporting Person [*] <u>Riggsbee Richard Bryan</u> | | 2. Issuer Name and Ticker or Trading Symbol <u>MYRIAD GENETICS INC</u> [MYGN] | (Check all applica Director X Officer (g | 10% give title Othe | o Owner er (specify | |
| (Last) (Firs 320 WAKARA WAY | , , , , | 3. Date of Earliest Transaction (Month/Day/Year) 03/24/2021 | below) | belo ef Financial Office | ' | |
| (Street) SALT LAKE | 84108 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | Line) | Joint/Group Filing (Check Applica | | |
| CITY | | | Form file Person | ed by More than One R | eporting | |

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) | 3. Transaction Code (Instr. 8) | | | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|---|---|--------|---------------|-------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 03/24/2021 | | A ⁽¹⁾ | | 32,774 | Α | \$0.0 | 339,925 | 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) | | of E | | 6. Date Exerc Expiration Da (Month/Day/Y | and 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) | 11. Nature of Indirect 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 four equal annual installments beginning on the first anniversary of the grant date.

| By: Nathan A. Smith For: | |
|----------------------------------|--|
| Richard Bryan Riggsbee | |
| ** Signature of Penorting Person | |

03/26/2021

Date Signature of Reporting Person

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.