Edgar Filing: MYRIAD GENETICS INC - Form 4

MYRIAD G	ENETICS INC										
Form 4	7 0015										
September 1											
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMMISSION	OMB APPROVAL OMB Number: 3235-02			
Check this box Expires: Januar											
(Print or Type]	Responses)										
King Gary A. Syr			Symbol	2. Issuer Name and Ticker or Trading /mbol IYRIAD GENETICS INC [MYGN]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Check								
				(Month/Day/Year) 09/15/2015				Director 10% Owner X Officer (give title Other (specify below) below) Exec. VP International Ops			
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
SALT LAK	E CITY, UT 84	108						Form filed by M Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative S	Securi	ties Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	(Month/Day/Year) Execution Date, if		n Date, if	3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 2 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
C				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	09/15/2015			A <u>(1)</u>	34,500	А	\$0	85,973	D		
Common Stock	09/17/2015			F <u>(2)</u>	5,400	D	\$ 41.39	80,573	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
King Gary A. 320 WAKARA WAY SALT LAKE CITY, UT 84108			Exec. VP International Ops				
Signatures							
By: Richard Marsh For: Gary King	09/17/	/2015					
**Signature of Reporting Person	Dat	e					

Explanation of Responses:

- * 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).

Consists of restricted stock units granted pursuant to the Company's 2010 Employee, Director and Consultant Equity Incentive Plan. Each
 (1) restricted stock unit represents a contingent right to receive one share of the Company's common stock and vests 25% on September 30, 2016, 25% on September 30, 2017, 25% on September 30, 2018, and 25% on September 30, 2019.

(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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number. s report shall not be deemed an admission of benedicial ownership of these securities, for purposes of Section 16 or for other purposes.

Remarks:

Certain errors in the reporting person's total share ownership calculation (Column 5 - Amount of Securities Beneficially Owner Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.