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Sanders Walt Form 4	ter Lloyd											
October 02, 2	2018											
FORM	14									PPROVAL		
		SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						3235-0287				
Check thi if no long subject to Section 1 Form 4 or	er STATE 6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires: January 3 200 Estimated average burden hours per response 0.		
Form 5 obligatior may conti <i>See</i> Instru 1(b).	inue. Section 17	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section										
(Print or Type R	Responses)											
			2. Issuer Name and Ticker or Trading Symbol MYRIAD GENETICS INC [MYGN]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Chec						k all applicable)			
320 WAKARA WAY			(Month/Day/Year) 09/30/2018					Director 10% Owner X Officer (give title Other (specify below) below) President Myriad Oncology				
				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 I Person	More than One Ro	eporting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	any		emed on Date, if /Day/Year)	3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)		Securities Beneficially Covned Brollowing B	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code V	(A or Amount (D		Price	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock	09/30/2018			D <u>(1)</u>	629	D	\$ 46	36,824	D			
Common Stock	09/30/2018			D <u>(1)</u>	629	D	\$ 46	36,195	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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	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					
Sanders Walter Lloyd 320 WAKARA WAY SALT LAKE CITY, UT 84108			President Myriad Oncology						
Signatures									
By: Richard Marsh For: Walter Sanders	10/	/02/2018							
**Signature of Reporting Person		Date							

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).
- (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.

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.