SEC Form 4

# FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Estimated average burden

hours per response: 0.5

3235-0287

OMB Number:

OMB APPROVAL

Washington, D.C. 20549

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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| --- | --- | --- | --- |
| 1. Name and Address of Reporting Person\*[Honeysett Kimberley E.](https://www.sec.gov/cgi-bin/browse-edgar?action=getcompany&CIK=0001695094) | 2. Issuer Name **and** Ticker or Trading Symbol[Varex Imaging Corp](https://www.sec.gov/cgi-bin/browse-edgar?action=getcompany&CIK=0001681622) [ VREX ] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)Director 10% OwnerX Officer (give title Other (specify below) below)SVP and General Counsel |  |
| (Last) (First) (Middle)C/O VAREX IMAGING CORP. | 3. Date of Earliest Transaction (Month/Day/Year)08/18/2022 |
| 1678 S. PIONEER ROAD |  |
| (Street) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line)X Form filed by One Reporting PersonForm filed by More than One Reporting Person |  |
| SALT LAKE UT 84104 |  |
| CITY |  |
| (City) (State) (Zip) |  |
| **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)** | **4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)** | **5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)** | **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** |
| Common Stock | 08/18/2022 |  | S |  | 3,028 | D | $23.5(1) | 4,733(2) | D |  |  |
| Common Stock |  |  |  |  |  |  |  | 195 | I | By Trust |  |
| **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.****Transaction Code (Instr. 8)** | **5.****Number of Derivative Securities Acquired****(A) or Disposed of (D) (Instr. 3, 4****and 5)** | **6. Date Exercisable and Expiration Date (Month/Day/Year)** | **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. The sales reported in this Form 4 were effected pursuant to a 10b5-1 trading plan adopted by the reporting person on May 31, 2022. All shares were sold at $23.50

2. Amount of securities beneficially owned at end of reporting period reflect 218 shares purchased under the Varex Imaging Corporation 2017 Employee Stock Purchase Plan.

**Remarks:**

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).

/s/ Kimberley E. Honeysett 08/22/2022

\*\* Signature of Reporting Person Date

\*\* 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.**