FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE** COMMISSION

Washington, D.C. 20549

**OMB APPROVAL** OMB Number: 0104 Estimated average burden hours per 0.5 response:

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

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

	Address of Rewari Shubh	-	2. Date of E Requiring S (Month/Day	Statement y/Year) 20	3. Issuer Name and Ticker or Trading Symbol Varex Imaging Corp [ VREX ]					
	(First)	(Middle)	07/27/2020		4. Relationship of Reporting Issuer (Check all applicable) Director X Officer (give title below)	Person(s) to  10% Owner Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) SALT LAKE CITY (City)	UT (State)	84104 (Zip)			Chief Financial Officer				eck Applicable Form filed Person	by One Reporting
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				E	2. Amount of Securities Beneficially Owned (Instr. I)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of S Underlying Derivative So (Instr. 4)				5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr.
I I			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	nount Derivativ Security		or Indirect (I) (Instr. 5)	5)

**Explanation of Responses:** 

## Remarks:

No securities are beneficially owned.

/s/ Brian Qualls, Attorneyin-fact

08/04/2020

\*\* 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 5 (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.