FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPI	ROVAL							
OMB Number: 3235-0287								
Estimated average burden								
hours per response:	0.5							

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person*  Honeysett Kimberley E.  (Last) (First) (Middle)  C/O VAREX IMAGING CORP.  1678 S. PIONEER ROAD					S. Issuer Name and Ticker or Trading Symbol     Varex Imaging Corp [ VREX ]  3. Date of Earliest Transaction (Month/Day/Year) 02/18/2020						(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director					
(Street) SALT L. CITY	AKE U	Т	84104	4. lf <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)						Lin	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)									Persor	n ·				
		Tab	le I - Non-Der	ivative	Sec	curities	s Ac	quired, D	isposed	of, or Be	neficia	lly Owne	d				
Date			Date	nsaction h/Day/Year	r) E	2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Ins	on Dispo:			Benefic	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	/ Amou	nt (A) (D)	Price	Transaction(a)							
		Т	able II - Deriv (e.g.,					uired, Dis , options				y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise	3. Transaction Date	3A. Deemed	4. Transac	tion							,				,	
	Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Code (In		Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3	ve les ed	6. Date Exerc Expiration D (Month/Day/	ate	7. Title ar Amount of Securities Underlyin Derivative (Instr. 3 a	of s ig e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Derivative	(Month/Day/Year)	if any	Code (In		Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3	ve les ed	<b>Expiration D</b>	ate	Amount of Securities Underlyin Derivative (Instr. 3 a	of s ig e Security	Derivative Security	derivative Securities Beneficiall Owned Following Reported Transactio	ly	Ownership Form: Direct (D) or Indirect	of Indirect Beneficial Ownership	
Restricted Stock Units	Derivative	(Month/Day/Year)	if any	Code (In	nstr.	Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3, and 5)	es ed ed , 4	Expiration D (Month/Day/	ate Year)	Amount of Securities Underlyir Derivativo (Instr. 3 a	Amount or Number of	Derivative Security	derivative Securities Beneficiall Owned Following Reported Transactio	on(s)	Ownership Form: Direct (D) or Indirect	of Indirect Beneficial Ownership	

## **Explanation of Responses:**

- 1. Each Restricted Stock Unit converts into common stock on a one-for-one basis.
- 2. These Restricted Stock Units granted on February 18, 2020 vest 50% on February 15, 2022 and 50% on February 15, 2024. Vested shares will be delivered to the reporting person upon vest date.
- 3. These Performance Stock Options are subject to a four-year vesting schedule. 25% of the total number of options vest one year from grant date, and the remaining options vest monthly thereafter on a pro rata basis.

## Remarks:

/s/ Clarence R Verhoef attorney-in -fact 02/28/2020

\*\* 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 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.