FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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

| Name and Address of Reporting Person* Wood Todd Michael | | | | | | 2. Issuer Name and Ticker or Trading Symbol DermTech, Inc. [DMTK] | | | | | | | | (Che | ck all app Direc | , | ng Perso | on(s) to Is 10% Ov Other (s | wner |
|--|--|--|--|--|---|--|--|--------------------------------|---|------|---|---------------------------|---|---|--|------------------------------|---|---------------------------------------|---|
| (Last) (First) (Middle) C/O DERMTECH, INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/25/2021 | | | | | | | | 7 | below | | | below) | | |
| 11099 N. TORREY PINES RD. SUITE 100 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) LA JOLI | • | | | | | | | | | | | | 1 | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (City) (State) (Zip) | | | | | | | | | | | | | . 0.00 | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | | Execution D | | | 3. Transaction Code (Instr. 8) | | | | | A) or , 4 and | Benefic | ies cially Following | 6. Owne Form: D (D) or Ir (I) (Insti | Direct ndirect r. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | (A) (D) | or F | rice | | ction(s) | | | (ear .) |
| Common Stock 05/25/2 | | | | | | 2021 | | | | | 10,000 | I |) | \$40 | 152,944 | | Г | | |
| 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) | ve Conversion Date Execution or Exercise (Month/Day/Year) if any | | | | | | vative urities uired or osed) r. 3, 4 | 6. Date Expirati (Month/ | on Da | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | str. | . Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Ov Fo Dii or (I) | vvnership vrm: rect (D) Indirect (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code V | | (A) | (D) | Date Exercis | able | Expiration Date | Numb of Title Share | | | | | | | |

Explanation of Responses:

1. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 12, 2021.

Remarks:

/s/ Jason S. Miller, attorneyin-fact

05/27/2021

** 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.