| SEC Form 4 | |
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FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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

| to Section 16. | Form 4 or Form 5 | • | | | Estimated average burden | | | | | |
|--|--|---------|--|---|--------------------------------|----|--|--|--|--|
| Obligations ma Instruction 1(b) | y continue. See | | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 | L | hours per response: | | | | | |
| | | | or Section 30(h) of the Investment Company Act of 1940 | • | | | | | | |
| 1. Name and Addr Sun Kevin M | 1 0 | Person* | 2. Issuer Name and Ticker or Trading Symbol DermTech, Inc. [DMTK] | 5. Relationship of (Check all applical Director V Officer (g | ive title 0ther (spec | er | | | | |
| | .ast) (First) (Middle) /O DERMTECH, INC. 2340 EL CAMINO REAL | | 3. Date of Earliest Transaction (Month/Day/Year) 03/13/2023 | below) Chie | below) ef Financial Officer | | | | | |
| | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) | | | | 1 ' | ed by One Reporting Person | | | | | |
| SAN DIEGO | CA | 92130 | | Form file Person | d by More than One Reportin | ٦g | | | | |
| (City) | (State) | (Zip) | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |

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) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---------------------------------|--|---|---|---|--------|---------------|--------|---|---|---|--|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) | |
| Common Stock | 03/13/2023 | | S | | 514(1) | D | \$3.26 | 298,294 | D | | |

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) | Code (Instr. | | | | Expiration Date (Month/Day/Year) | | d 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) | Ownership | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | ct al nip |
|---|---|--|---|--------------|---|-----|-----|-------------------------------------|--------------------|---|--|---|--|-----------|--|-----------------|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |

Explanation of Responses:

1. The shares were sold by the reporting person to generate proceeds used to satisfy the tax withholding obligation that arose upon the vesting of certain restricted stock units granted to the reporting person on June 24, 2020.

Remarks:

/s/ Mo Tashakor, attorney-infact

03/15/2023

** 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.