FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the

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

affirmative defense 10b5-1(c). See Instr								
1. Name and Address Leddy Peter M	of Reporting Person* <u>lichael</u>		2. Issuer Name and Ticker or Trading Symbol MARAVAI LIFESCIENCES HOLDINGS, INC. [MRVI]	(Check	ionship of Reporting Perso all applicable) Director Officer (give title	erson(s) to Issuer 10% Owner Other (specify		
(Last) C/O MARAVAI I	MARAVAI LIFESCIENCES HOLDINGS, INC.		3. Date of Earliest Transaction (Month/Day/Year) 07/17/2023	X	below) See Rema	below)		
10770 WATERIDGE CIRCLE, SUITE 200			4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Appl X Form filed by One Reporting Persor					
(Street)				11	Form filed by More than	-		
SAN DIEGO	CA	92121			. cca by Word than	5.10 1.0ps.tag 1 010011		
(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)	e, Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
		Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Class A Common Stock	04/28/2023	A ⁽¹⁾	V	1,920	A	\$11.72	137,925	D	
Class A Common Stock	07/17/2023	F		5,578(2)	D	\$12.52	132,347	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	 3A. Deemed Execution Date, if any (Month/Day/Year)	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	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		Transaction(s) (Instr. 4)	

Explanation of Responses:

- 1. The Reporting Person is voluntarily reporting the acquisition of shares of the Issuer's Class A Common Stock pursuant to the Maravai LifeSciences Holdings, Inc. 2020 Employee Stock Purchase Plan. The acquisition of those 1,920 shares of Class A Common Stock was exempt pursuant to Rule 16b-3.
- 2. Represents shares withheld to satisfy tax withholding obligations in connection with the vesting of restricted stock unit awards held by the reporting person.

Remarks:

Chief Administrative Officer

/s/ Kurt Oreshack, by power of attorney for Peter Leddy

** Signature of Reporting Person Date

07/19/2023

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.