SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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 Addre		erson*	2. Issuer Name and Ticker or Trading Symbol MARAVAI LIFESCIENCES HOLDINGS,	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Dolan Christine			INC. [MRVI]		Director Officer (give title	10% Owner Other (specify			
(Last) (First) (Middle)		· · · ·	3. Date of Earliest Transaction (Month/Day/Year) 03/15/2023		below)	below)			
C/O MARAVAI LIFESCIENCES HOLDINGS, INC. 10770 WATERIDGE CIRCLE, SUITE 200			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)					
				X	1 80 11 /				
(Street)		02121			Form filed by More than	n One Reporting Person			
SAN DIEGO	CA	92121	_						
(City)	(State)	(Zip)							
		Table I - Non-De	rivative Securities Acquired, Disposed of, or Beneficia	ally Ow	ned				

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)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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	03/15/2023		A		55,775	A	(1)	72,604	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			(0.5	,, paro	, o u.	io, maii	unito,	optiono,			,0,				
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)	Transaction Code (Instr. r) 8)		Derivative		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)		
Employee Stock Options (Right to Buy)	\$15.52	03/15/2023		A		110,000		(2)	03/15/2033	Class A Common Stock	110,000	\$0	110,000	D	

Explanation of Responses:

1. Represents restricted stock units ("RSUs") awarded under the Maravai LifeSciences Holdings, Inc. 2020 Omnibus Incentive Plan. Each RSU represents the right to receive one share of Class A Common Stock of the Issuer upon vesting, subject to the Reporting Person's continued employment with the Issuer. The RSUs will vest in 1/3rd increments on each of March 15, 2024, March 15, 2025, and March 15, 2026, subject to the Reporting Person's continued employment with the Issuer.

2. Represents options awarded under the Maravai LifeSciences Holdings, Inc. 2020 Omnibus Incentive Plan. These options will vest 1/48th on April 15, 2023 and in equal 1/48th installments each month thereafter, subject to the Reporting Person's continued employment with the Issuer.

Remarks:

Chief Operating Officer, Biologics Safety Training

/s/ Kurt Oreshack, by power of 03/17/2023 attorney for Christine Dolan

** 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.

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