FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF CHANGE	S IN BENE	FICIAL C	WNERS	HIP

OMB APPROVAL										
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).

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* Shoff Lonnie					2. Issuer Name and Ticker or Trading Symbol Personalis, Inc. [PSNL]							(Ch	5. Relationship of Report (Check all applicable) X Director			on(s) to Iss		
(Last)	(Fi	rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/17/2023								(give title		Other (specification)		
C/O PERSONALIS, INC. 6600 DUMBARTON CIRCLE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person					
(Street)	NT C	A	94555											Form f Persor		e than	One Repor	ting
(City)	(Si	tate)	(Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.						d to							
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,		Code (Ins	Transaction Disposed Of (D Code (Instr. 5)			es Acquired (A) or Of (D) (Instr. 3, 4 and		nt of es ally Following	Form: (D) or	n: Direct or Indirect Indirect Indirect Indirect Indirect Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) o (D)	Price	Reporte Transac (Instr. 3	ction(s)			Instr. 4)		
		Т							uired, Dis , options					Owned				
1. Title of Derivative Security (Instr. 3) 1. Title of Conversion or Exercise Price of Derivative Security 1. Title of Conversion Date (Month/Day/Year) 1. Transaction Date (Execution Date if any (Month/Day/Year)) 1. Transaction Date (Execution Date if any (Month/Day/Year))		Date,	Transaction Code (Instr. B) S		of E		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 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)			
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$2.07	05/17/2023			A		40,000		(1)	05/	/17/2033	Common Stock	40,000	\$0.00	40,000		D	

Explanation of Responses:

1. 100% of the shares subject to the option shall vest on the earlier of the one-year anniversary of the grant date or the day prior to the Company's next annual meeting of stockholders occurring after the grant date, subject to the reporting person's Continuous Service (as defined in the Company's 2019 Equity Incentive Plan) through the vesting date. In the event of a Change in Control (as defined in the Company's 2019 Equity Incentive Plan), the shares underlying the option shall vest and become immediately exercisable prior to the effectiveness of such Change in Control.

Remarks:

/s/ Aaron Tachibana, Attorney-05/19/2023 in-Fact

** 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.