FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

1. Name and Address of Reporting Person* Tachibana Aaron						2. Issuer Name and Ticker or Trading Symbol Personalis, Inc. [PSNL]								(Chec	k all app Direc	licable)	ng Person(s) to Is 10% O		
(Last) (First) (Middle) C/O PERSONALIS, INC. 1330 O'BRIEN DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 09/17/2021									Chief Financial Officer				
(Street) MENLO (City)		4. If Amendment, Date of Original Filed (Month/Day/Year)								Line) X	Form filed by One Reporting Person Form filed by More than One Reporting Person								
Table I - Non-Deriva: 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day) Common Stock 09/17/2				ion 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)) or	5. Amo Securit Benefic	ount of ties cially I Following	6. Ownersh Form: Dire (D) or Indir (I) (Instr. 4)	ect E	7. Nature of Indirect Beneficial Ownership			
				09/17/2	2021				Code	v	Amount 3,152 ⁽¹⁾	(A) (D)	ļ-	ice 21.25	Reported Transaction(s) (Instr. 3 and 4)		D		(Instr. 4)
1. Title of Derivative Security (Instr. 3)	Table II - D (e e of 2.		Derivati (e.g., pu ^{med} on Date,	ive Securi			mber rative rities ired r osed	quired, Disp s, options, o er 6. Date Exerc Expiration Da (Month/Day/Y		osed of, convertib	or Benefic		8. F Der See (Instru	<u> </u>		of 10. Owner Form: Direct or Ind (I) (Ins	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

1. Shares sold to cover tax obligation from settlement of vested restricted stock units.

Remarks:

/s/ Aaron Tachibana

09/21/2021

** 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.