## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burde	en								
l	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

1. Name and Address of Reporting Person*  JONES EVAN/ FA					2. Issuer Name <b>and</b> Ticker or Trading Symbol VERACYTE, INC. [ VCYT ]							(Check all ap		,		ssuer			
(Last) 6000 SH SUITE 30	ORELINE	,	Middle)	)		3. Date of Earliest Transaction (Month/Day/Year) 01/14/2020								Offic belov	er (give title w)		Other (specify below)		
(Street) SOUTH SAN FRANCISCO CA 94080  (City) (State) (Zip)					- 4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	•				
		Tabl	e I - 1	Non-Deriv	/ative	Sec	uritie	es Ac	quire	ed, D	isposed o	f, or E	Benefic	ially	Owne	ed			
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			nd 5) Secui Benef Owne		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price			action(s) 3 and 4)		(Instr. 4)		
Common Stock			01/14/20	2020				S <sup>(1)</sup>		4,700	D	\$28.4	769 <sup>(2)</sup>	154,002		I	by jVen Capital, LLC <sup>(3)</sup>		
Common Stock			01/14/2020				S <sup>(1)</sup>		300	D	\$28.9	333 <sup>(4)</sup>	153,702		I	by jVen Capital, LLC <sup>(3)</sup>			
Common Stock													2	25,000	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  (Instr. 3)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)		ition Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exe Expiration I (Month/Day			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deriv Secu (Inst	vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares						

## **Explanation of Responses:**

- $1.\ The\ transactions\ on\ this\ Form\ 4\ were\ made\ pursuant\ to\ a\ Rule\ 10b5-1\ plan\ adopted\ by\ the\ reporting\ person\ on\ August\ 20,\ 2019.$
- 2. Represents weighted average sales price. Sale prices for the transactions range from \$27.91 to \$28.87. Detailed information regarding the number of shares sold at each separate price will be provided to the SEC, the issuer or a shareholder upon request.
- 3. The Reporting Person is the sole managing member of jVen Capital, LLC.
- 4. Represents weighted average sales price. Sale prices for the transactions range from \$28.91 to \$28.95. Detailed information regarding the number of shares sold at each separate price will be provided to the SEC, the issuer or a shareholder upon request.

## Remarks:

/s/ Keith Kennedy, as Attorney-01/15/2020

\*\* Signature of Reporting Person

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.