

Form PTO-1595 (Rev. 07/05)  
OMB No. 0651-0027 (exp. 8/30/2008)

U.S. DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office

## RECORDATION FORM COVER SHEET PATENTS ONLY

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

### 1. Name of conveying party(ies)

Donna Shattuck  
Christopher Neff  
Victor Abkevich  
Srikanth Jammulapati

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

### 3. Nature of conveyance/Execution Date(s):

Execution Date(s) 11/16/06, 11/20/06, 11/16/06, 11/16/06

- ☒ Assignment ☐ Merger  
☐ Security Agreement ☐ Change of Name  
☐ Joint Research Agreement  
☐ Government Interest Assignment  
☐ Executive Order 9424, Confirmatory License  
☐ Other \_\_\_\_\_

### 2. Name and address of receiving party(ies)

Name: Myriad Genetics, Inc.

Internal Address: \_\_\_\_\_

Street Address: 320 Wakara Way

City: Salt Lake City

State: Utah

Country: U.S.A. Zip: 84108

Additional name(s) & address(es) attached? ☐ Yes ☒ No

### 4. Application or patent number(s): ☐ This document is being filed together with a new application.

A. Patent Application No.(s)

11/509,296

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

### 5. Name and address to whom correspondence concerning document should be mailed:

Name: Myriad Genetics, Inc.

Internal Address: Intellectual Property Department

Street Address: 320 Wakara Way

City: Salt Lake City

State: Utah Zip: 84108

Phone Number: (801) 584-3600

Fax Number: (801) 883-3871

Email Address: \_\_\_\_\_

### 6. Total number of applications and patents involved: 1

### 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00

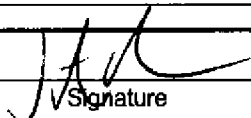
- ☐ Authorized to be charged by credit card  
☒ Authorized to be charged to deposit account  
☐ Enclosed  
☐ None required (government interest not affecting title)

### 8. Payment Information

a. Credit Card Last 4 Numbers \_\_\_\_\_  
Expiration Date \_\_\_\_\_

b. Deposit Account Number 50-1627  
Authorized User Name Myriad Genetics, Inc.

### 9. Signature:

  
Signature

Jonathan A. Baker, Ph.D.  
Name of Person Signing

49,022  
Registration No.

November 29, 2006  
Date

Total number of pages including cover sheet, attachments, and documents:

7

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:  
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

## ASSIGNMENT

**WHEREAS, WE, Donna Shattuck, Christopher Neff, Victor Abkevich, Srikanth Jammulapati,** are the inventors of an invention in **DEP2 AND ITS USES IN MAJOR DEPRESSIVE DISORDER AND OTHER RELATED DISORDERS**, for which we have executed an application for Letters Patent of the United States, serial number 11/509,296, filed **August 24, 2006**; and

**WHEREAS, MYRIAD GENETICS, INC.,** duly organized under the laws of Delaware, with a place of business at 320 Wakara Way, Salt Lake City, Utah 84108, is desirous of obtaining the entire right, title and interest in, to and under the said invention and the said application;

**NOW, THEREFORE,** in exchange for good and valuable consideration, we the said **Donna Shattuck, Christopher Neff, Victor Abkevich, Srikanth Jammulapati** have sold, assigned, transferred and set over, and by these presents do hereby sell, assign, transfer and set over, unto the said MYRIAD GENETICS, INC., its successors, legal representatives and assigns, the entire right, title and interest in, to and under the said invention, and the said application and all divisions, renewals and continuations thereof, and all Letters Patent of the United States which may be granted thereon and all reissues and extensions thereof, and all applications for Letters Patent which may hereafter be filed for said invention in any country or countries foreign to the United States, and all Letters Patent which may be granted for said invention in any country or countries foreign to the United States and all extensions, renewals and reissues thereof and all rights of priority in any such country or countries based upon the filing of the said application for Letters Patent of the United States which are created by any law, treaty or international convention; and we hereby authorize and request the Commissioner of Patents of the United States, and any Official of any country or countries foreign to the United States, whose duty is to issue patents on applications as aforesaid, to issue all Letters Patent for said invention to the said MYRIAD GENETICS, INC., its successors, legal representatives and assigns, in accordance with the terms of this instrument.

**AND WE HEREBY** covenant that we have full right to convey the entire interest herein assigned, and that we have not executed, and will not execute, any agreement in conflict herewith.

**AND WE HEREBY** further covenant and agree that we will communicate to said MYRIAD GENETICS, INC., its successors, legal representatives and assigns, any facts known to us respecting said invention, and testify in any legal proceeding, sign all lawful papers, execute all divisional, continuing and reissue applications, make all rightful oaths and generally do everything possible to aid the said MYRIAD GENETICS, INC., its successors, legal representatives and assigns, to obtain and enforce proper patent protection for said invention in all countries.

Attorney Docket No.1319-01-2X

**IN TESTIMONY WHEREOF**, we hereunto set our hands and seals the day and year set opposite our respective signatures.

Donna M Shattuck  
Donna Shattuck

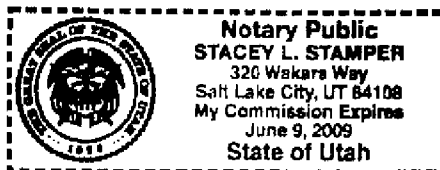
Date 11/16/06

Address: 1874 Texas Street  
Salt Lake City, Utah 84108

Citizenship: U.S.A.

State of Utah )  
County of Salt Lake )

I certify that I know or have satisfactory evidence that Donna Shattuck is the person who appeared before me, and said person acknowledged that he/she signed this instrument and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in the instrument.



Dated 11/16/06

Signature of  
Notary Public Stacey Stamper

Printed Name Stacey Stamper

My commission expires 6/9/09

Attorney Docket No.1319-01-2X

Christopher Neff  
Christopher Neff

Date 11/20/06

Address: 2615 East Stanford Lane  
Holladay, Utah 84117

Citizenship: U.S.A.

State of Utah )  
County of Salt Lake )

I certify that I know or have satisfactory evidence that Christopher Neff is the person who appeared before me, and said person acknowledged that he/she signed this instrument and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in the instrument.



Dated 11/20/06

Signature of  
Notary Public Stacey Stamper

Printed Name Stacey Stamper

My commission expires 6/9/09

Attorney Docket No.1319-01-2XVictor Abkevich

Victor Abkevich

Date

11/16/06

Address: 400 East 530 South, Apt. #2306  
Salt Lake City, Utah 84111

Citizenship: U.S.A.

State of Utah )

)

County of Salt Lake )

I certify that I know or have satisfactory evidence that Victor Abkevich is the person who appeared before me, and said person acknowledged that he/she signed this instrument and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in the instrument.



Notary Public  
STACEY L. STAMPER  
320 Wakara Way  
Salt Lake City, UT 84108  
My Commission Expires  
June 9, 2009  
State of Utah

Dated

11/16/06

Signature of

Notary Public

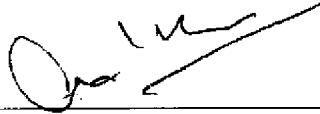
Stacey Stamper

Printed Name

Stacey Stamper

My commission expires

6/9/09

Attorney Docket No.1319-01-2XDate 11/16/06

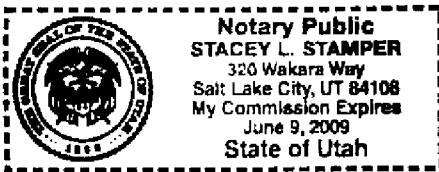
Srikanth Jammulapati

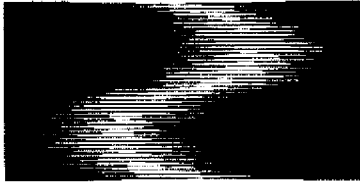
Address: 2142 Roosevelt Avenue  
Salt Lake City, Utah 84108

Citizenship: U.S.A.

State of Utah )  
)  
County of Salt Lake )

I certify that I know or have satisfactory evidence that Srikanth Jammulapati is the person who appeared before me, and said person acknowledged that he/she signed this instrument and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in the instrument.

Dated 11/16/06Signature of  
Notary Public Stacey StamperPrinted Name Stacey StamperMy commission expires 6/9/09

**MYRIAD**

**MYRIAD GENETICS, INC.**  
**320 WAKARA WAY**  
**SALT LAKE CITY, UT 84108**  
**www.myriad.com**

To: Assignment Recordation Services	
Company: U.S. Patent and Trademark Office	
Fax: 571-273-0140	
From: Jonathan A. Baker	
email: <a href="mailto:jbaker@myriad.com">jbaker@myriad.com</a>	
Phone: 1-801-584-3600	Fax: 1-801-883-3871

**DATE:** November 29, 2006**NUMBER OF PAGES :** 8 (including cover)**Attorney Docket No.:** 1319-01-2X**Inventors:** Katz et al.**Application No.:** 11/509,296**Filed:** August 24, 2006**For:** DEP2 AND ITS USES IN MAJOR DEPRESSIVE DISORDER  
AND OTHER RELATED DISORDERS

**Attached please find a Recordation Form Cover Sheet along with an Assignment to be recorded with the U.S. PTO.**

THE DOCUMENTS ACCOMPANYING THIS TRANSMISSION CONTAIN INFORMATION THAT IS CONFIDENTIAL. THIS INFORMATION IS INTENDED TO BE FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ON THIS TRANSMISSION SHEET. IF YOU ARE NOT THE INTENDED RECIPIENT, BE AWARE THAT ANY DISCLOSURE, COPYING, DISTRIBUTION OR USE OF THE CONTENTS OF THE INFORMATION IS PROHIBITED BY LAW. IF YOU HAVE RECEIVED THIS TRANSMISSION IN ERROR, PLEASE NOTIFY US BY TELEPHONE IMMEDIATELY SO THAT WE CAN ARRANGE FOR THE RETRIEVAL OF THE ORIGINAL DOCUMENT AT NO COST TO YOU.

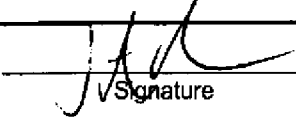
**PATENT**  
**REEL: 018565 FRAME: 0277**

Form PTO-1595 (Rev. 07/05)  
OMB No. 0651-0027 (exp. 6/30/2008)

U.S. DEPARTMENT OF COMMERCE  
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To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

<b>1. Name of conveying party(ies)</b> Donna Shattuck Christopher Neff Victor Abkevich Srikanth Jammulapati  Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>2. Name and address of receiving party(ies)</b>  Name: <u>Myriad Genetics, Inc.</u>  Internal Address: _____  Street Address: <u>320 Wakara Way</u>  City: <u>Salt Lake City</u>  State: <u>Utah</u>  Country: <u>U.S.A.</u> Zip: <u>84108</u>  Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>3. Nature of conveyance/Execution Date(s):</b>  Execution Date(s) <u>11/16/06, 11/20/06, 11/16/06, 11/16/06</u>  <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Joint Research Agreement <input type="checkbox"/> Government Interest Assignment <input type="checkbox"/> Executive Order 9424, Confirmatory License <input type="checkbox"/> Other _____	<b>4. Application or patent number(s):</b> <input type="checkbox"/> This document is being filed together with a new application.  <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;">           A. Patent Application No.(s)   <u>11/509,296</u> </td> <td style="width: 50%; vertical-align: top;">           B. Patent No.(s)         </td> </tr> </table> Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	A. Patent Application No.(s)  <u>11/509,296</u>	B. Patent No.(s)
A. Patent Application No.(s)  <u>11/509,296</u>	B. Patent No.(s)		
<b>5. Name and address to whom correspondence concerning document should be mailed:</b>  Name: <u>Myriad Genetics, Inc.</u>  Internal Address: <u>Intellectual Property Department</u>  Street Address: <u>320 Wakara Way</u>  City: <u>Salt Lake City</u>  State: <u>Utah</u> Zip: <u>84108</u>  Phone Number: <u>(801) 584-3600</u>  Fax Number: <u>(801) 883-3871</u>  Email Address: _____	<b>6. Total number of applications and patents involved:</b> <u>1</u>  <b>7. Total fee (37 CFR 1.21(h) &amp; 3.41) \$ 40.00</b> <input type="checkbox"/> Authorized to be charged by credit card <input checked="" type="checkbox"/> Authorized to be charged to deposit account <input type="checkbox"/> Enclosed <input type="checkbox"/> None required (government interest not affecting title)  <b>8. Payment Information</b> a. Credit Card Last 4 Numbers _____ Expiration Date _____  b. Deposit Account Number <u>50-1627</u> Authorized User Name <u>Myriad Genetics, Inc.</u>		
<b>9. Signature:</b>  _____ <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           Signature   <u>Jonathan A. Baker, Ph.D.</u>            Name of Person Signing         </div> <div style="width: 45%;">           49,022            Registration No.             November 29, 2006            Date             Total number of pages including cover sheet, attachments, and documents: <span style="border: 1px solid black; padding: 2px 10px;">7</span> </div> </div>			

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