FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

## OMB APPROVAL 3235-0287 OMB Number:

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(h)

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*  CORBETT JAMES							r Name <b>a</b> i 'A <b>M</b> ed							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
CURDETT JAMES												_		X Directo	or		10% Ov	vner				
(Last)	(Last) (First) (Middle) C/O AVITA MEDICAL, INC.							3. Date of Earliest Transaction (Month/Day/Year) 12/22/2021											Other (s below)	specify		
28159 AVENUE STANFORD, SUITE 200							4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)																X Form	filed by One	e Rep	orting Perso	n		
VALENCIA CA 91355													Form filed by More than One Reporting Person									
(City)	(Si	tate)	(Zip)																			
		Tab	le I - Nor	n-Deriv	ative	e Se	curitie	s Ac	quir	ed, D	isp	osed o	of, or	Bene	eficial	ly Owned	l					
Date					action Day/Ye		2A. Deemed Execution Date, if any (Month/Day/Year)			Transaction Code (Instr.					(A) or 3, 4 an	Benefici Owned I	es Fo ally (D) Following (I)		n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership		
						C	ode	v	Amount	mount (A) or (D)		Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)					
Common Stock 12/2					2/202	/2021			A		8,675 A		Α	(1)	8,6	8,675(2)		D				
Common Stock 1				12/2	2/2021					Α		4,350		A	(3)	13,025(2)			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	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transactior Code (Instr. 8)				Expira	6. Date Exercisa Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	cisable		piration ate	Title	OI N Of	umber							
Stock Options (Right to Buy)	\$12.18	12/22/2021			A		4,925		(4	(4)	12	//22/2031	Comr		1,925	\$0.00	4,925	5	D			
Stock Options	\$12.18	12/22/2021			A		2,550		(!	(5)	12	/22/2031	Comr		2,550	\$0.00	2,550	)	D			

## **Explanation of Responses:**

- 1. Represents an award of Restricted Stock Units ("RSUs"), each representing a contingent right to be issued one share of Common Stock, that are subject to time-based vesting criteria. These RSUs vest in three equal annual installments on the first, second and third anniversaries of the grant date.
- 2. Includes unvested RSUs.
- 3. Represents an award of RSUs that vest on the date 12 months following the grant date.
- 4. These Stock Options vest in three equal annual installments on the first, second and third anniversaries of the grant date.
- 5. These Stock Options vest on the date 12 months following the grant date.

## Remarks:

Buy)

/s/ Donna Shiroma, by power of attorney

\*\* 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.