FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Vashington, D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OW	NERSHIP

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

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*  Llewelyn Linda						2. Issuer Name and Ticker or Trading Symbol Health Catalyst, Inc. [ HCAT ]								Check	all app Direc	,	ng Per	10% O	
(Last) (First) (Middle) C/O HEALTH CATALYST, INC. 10897 SOUTH RIVER FRONT PARKWAY, #300						3. Date of Earliest Transaction (Month/Day/Year) 03/01/2023								X	belov	Chief People		below)	
(Street) SOUTH JORDAN UT 84095  (City) (State) (Zip)					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								. Indivine)	·				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transactio Date (Month/Day/Y					if any	emed ion Date, /Day/Year)		3. Transaction Code (Instr. 8)  4. Securities Disposed Of			Acquired (A) of (D) (Instr. 3, 4		and 5) Sec Ben Owi		curities neficially		n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(30. 4)
Common	)23				F <sup>(1)</sup>		1,734	D	\$14.2	2886		82,311		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)				Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			e and int of ities 'lying ative ity (Instr. 4)  Amount or Number of	ıt				10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

## Remarks:

/s/ Daniel Orenstein, as 03/03/2023 Attorney-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.

<sup>1.</sup> Represents the number of shares required to be sold by the Reporting Person to cover tax withholding obligations in connection with the vesting of Issuer's Restricted Stock Units. This sale is mandated by the Issuer's election under its equity incentive plans to require the satisfaction of tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary trade by the Reporting Person.