FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		
	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(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* Alger Jason					2. Issuer Name and Ticker or Trading Symbol Health Catalyst, Inc. [HCAT]										all app Direc Office	onship of Reportir Il applicable) Director Officer (give title below)		10% Ov Other (s	vner
(Last) (First) (Middle) C/O HEALTH CATALYST, INC.			3. Date of Earliest Transaction (Month/Day/Year) 12/06/2022											nief Accou	ıntin	,			
10897 SOUTH RIVER FRONT PARKWAY, #300																			
(Street)				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
SOUTH UT 84095												X	Form filed by One Reporting Person						
JORDAN 61 640/3														Form filed by More than One Reportin Person					
(City)	(Sta	ate) (Z	Zip)																
		Table	I - N	on-Deriva	tive S	Secui	rities	Acc	quired	d, Dis	posed of	, or E	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/N				Execution Date,				3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)					and 5) Securi Benefi		ities Feicially (I d Following (I)		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(111041. 4)	
Common Stock 12/06/202					22			S ⁽¹⁾		259	D	\$10.3	911	33,762			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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		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)		7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)						Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. The sale reported on this Form 4 was made pursuant to a written trading plan adopted by the Reporting Person in accordance with Rule 10b5-1.

Remarks:

/s/ Daniel Orenstein, as Attorney-in-Fact

12/08/2022

** 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.