FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
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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

Name and Address of Reporting Person*     Orenstein Daniel H.						Issuer Name and Ticker or Trading Symbol Health Catalyst, Inc. [ HCAT ]								5. Relationship of Reporting Person(s) to Iss (Check all applicable)  Director  Officer (give title  Other (s					wner
(Last) (First) (Middle) C/O HEALTH CATALYST, INC. 10897 SOUTH RIVER FRONT PARKWAY, #300						3. Date of Earliest Transaction (Month/Day/Year) 09/03/2021								71	below)	General	Cou	below) nsel	
(Street) SOUTH JORDAN UT 84095						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(Si	-	(Zip)	Nan Bari															
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				ion	n 2A. Deemed Execution Date,			3. Transa Code (I 8)	ction	4. Securities Disposed Of	Acquired	l (A) or		5. Amount of Securities Beneficially Owned Follow		Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	ted action(s) 3 and 4)			(Instr. 4)
Common Stock 09/03/202					021				M		2,500	A	A \$10.34 79,398		,398		D		
Common Stock 09/03/202					021	s <sup>(1)</sup> 3,852 D \$54.3208 <sup>(2)</sup> 75,546					5,546		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. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amoun or Numbe of Shares	r					
Stock Option (Right to Buy)	\$10.34	09/03/2021			M			2,500	(3	)	02/10/2026	Commo Stock	<sup>n</sup> 2,500		\$0.00	126,000	0	D	

## **Explanation of Responses:**

- 1. The sale reported on this Form 4 was made pursuant to a written trading plan adopted by the Reporting Person on March 4, 2021, in accordance with Rule 10b5-1.
- 2. Represents a weighted average price. These shares were sold by the Reporting Person in multiple transactions at prices ranging from \$53.85 to \$54.65, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this Footnote.
- 3. 25% of the 136,316 shares underlying the options vested in an annual installment on December 31, 2016 and the remaining balance vested in equal monthly installments until the option vested in full on Dec. 31, 2019.

## Remarks:

/s/ Daniel Orenstein

09/08/2021

41. .

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.