FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Nashington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).			Filed	pursua or Se	ant to S ection 3	ection 0(h) o	16(a) f the I	of the	Securi ent Co	ties Exchang Impany Act o	e Act o f 1940	of 1934		Liloui	s per r	esponse:	0.5
1. Name and Address of Reporting Person* Orenstein Daniel H.					2. Issuer Name and Ticker or Trading Symbol Health Catalyst, Inc. [HCAT]								5. Relationship of Report (Check all applicable) Director			erson(s) to Is 10% O	wner	
(Last) (First) (Middle) C/O HEALTH CATALYST, INC. 10897 SOUTH RIVER FRONT PARKWAY, #300					3. Date of Earliest Transaction (Month/Day/Year) 09/06/2022									elow) Genera		below)	spoony	
(Street) SOUTH JORDAN			34095 Zip)		4. If A										dividual or Joint/Group Filing (Check Applicable) Compared to the proof of the pr			
		Table	I - No	on-Deriva	tive S	Secui	rities	Acc	quire	d, Dis	posed of	, or E	Benefic	ally O	wned			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				Execution Da		ion Date,					curities Acquired (A) osed Of (D) (Instr. 3, 4		d 5) Se Be Ov	5. Amount of Securities Beneficially Owned Following		m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price	Tra	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 09/0				09/06/20	022			S ⁽¹⁾		2,838	D	\$11.2	99,608		D			
		Tai	ble II								osed of, convertib				ned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year) Month/Day/Year)		of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rities ired osed : 3, 4	Expiration Date (Month/Day/Year) Date Expiration			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares		8. Price Derivat Securit (Instr. 5	ive derivative y Securities	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Benefical Ownership (Instr. 4)		

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

09/08/2022

** 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.