SEC Form 4															
FOF	RM 4	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).		STA	INERSH		Estima	Number: ated average burde per response:	3235-0287 en 0.5								
1. Name and Address of Reporting Perso Horstmeier Paul		n*		2. Issuer Name and Ticker or Trading Symbol <u>Health Catalyst, Inc.</u> [HCAT]						k all applicable) Director Officer (give)		Owner (specify		
(Last) (First) (Middle) C/O HEALTH CATALYST, INC. 3165 MILLROCK DRIVE, #400				ate of Earliest Transa 03/2020	Day/Year)		below) Chief (below) ef Operating Officer							
(Street) SALT LAKE UT 84121 CITY				Amendment, Date of	I (Month/Day/'	6. Indi Line) X									
(City)	(State)	(Zip)													
	Та	able I - No	on-Derivative	Securities Acc	quired	l, Dis	posed of,	or Bei	neficially	Owned					
Da			2. Transaction Date (Month/Day/Year	Execution Date,		action (Instr.	4. Securities Disposed Of			5. Amount of Securities Beneficially Owned Follow Reported	у	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
					Code	v	Amount	(A) or (D)	Price	Transaction(s			(Instr. 4)		

Common Stock 08/03/2020 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(-3),															
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	xercise (Month/Day/Year) if any e of (Month/Day/Year) vative		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)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$15.84	08/03/2020		М			10,750	(4)	02/05/2029	Common Stock	10,750	\$0.00	13,392	D	

Μ

S⁽¹⁾

S⁽¹⁾

10,750

8.806

1,994

\$15.84

\$35.62(2)

\$35.02(3)

Α

D

D

92,054

83.248

81,254

D

D

D

Explanation of Responses:

Common Stock

Common Stock

1. The sale reported on this Form 4 was made pursuant to a written trading plan adopted by the Reporting Person on November 22, 2019, 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 \$35.30 to \$35.97, inclusive.

3. Represents a weighted average price. These shares were sold by the Reporting Person in multiple transactions at prices ranging from \$34.29 to \$35.28, 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 Footnotes (2) and (3).

4. 25% of the 25,000 shares underlying the option vested in an annual installment and the remaining balance vested or will vest in equal monthly installments until the option vests in full on February 05, 2023. **Remarks:**

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

08/05/2020

** 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).

08/03/2020

08/03/2020

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.