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											
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

Name and Address of Reporting Person*     Llewelyn Linda					2. Issuer Name and Ticker or Trading Symbol Health Catalyst, Inc. [ HCAT ]									k all app Direc	tor 10%		10% Ov	vner	
(Last)	(Fir	st) (MALYST, INC.	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/15/2024								X	belov	er (give title v) Chief Pec	ople C	Other (s below) Officer	specify	
10897 SOUTH RIVER FRONT PARKWAY, #300					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) SOUTH JORDAN													X	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									nded to					
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	iciall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Exec ay/Year) if any		Deemed ecution Date, ny onth/Day/Year)					es Acquired (A Of (D) (Instr. 3,			Securit Benefic Owned	Amount of ecurities eneficially wned Following		n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) (D)	or Pi	rice	Report Transa (Instr. 3	saction(s) r. 3 and 4)			(Instr. 4)
Common Stock 04/15/2					/2024				<b>S</b> <sup>(1)</sup>	s <sup>(1)</sup> 2,005		Г	) {	6.11	.11 126,226			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)	ive Conversion Date Execution Date, y or Exercise (Month/Day/Year) if any		on Date,	4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V (A) (I		(D)			Expiration Date	Title	Amou or Numb of Share	er						

## **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 May 23, 2023 in accordance with Rule 10b5-1.

## Remarks:

/s/Benjamin Landry, as Attorney-in-Fact

04/17/2024

\*\* 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.