FORM 4

Check this box if no longer subject

1. Name and Address of Reporting Person

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

5. Relationship of Reporting Person(s) to Issuer

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

Llewelyn Linda						Health Catalyst, Inc. [ HCAT ]								Check X	Direc Office	er (give title	<b>y</b> -	10% Ov Other (s	
(Last) (First) (Middle) C/O HEALTH CATALYST, INC. 10897 SOUTH RIVER FRONT PARKWAY, #300						3. Date of Earliest Transaction (Month/Day/Year) 03/01/2021								Α	below	v) Chief Peo	ple (	below) Officer	
(Street) SOUTH JORDAN UT 8409			4095	5	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)			Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				2. Transaction Date (Month/Day/Ye	ear) E	any	ution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			nd 5) Secur Benef		ities Fo icially (D d Following Ind		m: Direct or irect (I)	7. Nature of Indirect Beneficial Ownership
								[	Code	v	Amount	(A) or (D)	Price	Trans		action(s) 3 and 4)		tr. 4)	(Instr. 4)
Common Stock 03/01/202					1				F <sup>(1)</sup>		513	D	\$48.59	48.5968 <sup>(2)</sup>		41,874		D	
Common Stock 03/01/202					1				F <sup>(1)</sup>		16 D		\$49.62	28 <sup>(3)</sup>	8 <sup>(3)</sup> 41,858			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)	Exe if ar	Deemed cution Date, ny nth/Day/Year)		ansaction de (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Date Exe piration pnth/Day		Amo Secu Unde Deriv	,	Deri Sec (Ins	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	te ercisable	Expiration e Date	ı Title	Amount or Number of Shares						

## **Explanation of Responses:**

- 1. Represents the number of shares required to be sold by the Reporting Person to cover tax withholding obligations in connection with the vesting of Issuer's Restricted Stock Units. This sale is mandated by the Issuer's election under its equity incentive plans to require the satisfaction of tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary trade by
- 2. Represents the weighted average sale price of the shares sold ranging from \$48.15 to \$49.06 per share, inclusive.
- 3. Represents the weighted average sale price of the shares sold ranging from \$49.17 to \$49.93 per share, 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).

## Remarks:

/s/ Daniel Orenstein, as 03/03/2021 Attorney-in-Fact

\*\* 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.