Instruction 1(b).

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Washington,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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Name and Address of Reporting Person* Hinton Bryan Richard				2. Issuer Name and Ticker or Trading Symbol Health Catalyst, Inc. [HCAT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Timton Diyan Nicharu													Direc			10% Ov				
														X Officer (give title below)				Other (specify below)		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)								Chief Technology Officer						
C/O HEALTH CATALYST, INC.				06/01/2021																
10897 SOUTH RIVER FRONT PARKWAY, #300																				
					4. If Amendment, Date of Original Filed (Month/Day/Year)							r) 6.	6. Individual or Joint/Group Filing (Check Applicable							
(Street)					1								Ĺ	Line)						
SOUTH	_ U'I	Г 8	409	5	1									X Form filed by One Reporting Person					on	
JORDAN	N														Form Perso	filed by Moi on	re tha	n One Repo	orting	
(City)	(St	ate) (2	Zip)																	
		Table	1 - 1	Non-Deriva	tive S	Secui	rities	Ac	quir	ed, Di	sposed o	of, or	Benefici	ally	Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				Execution I		n Date, Ti		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			nd 5) Se Be Ov		Amount of ecurities eneficially wned Following		m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership		
							ſ	Code	v	Amount	(A) or (D)	Price		Reported (In Transaction(s) (Instr. 3 and 4)		(IIISI	tr. 4)	(Instr. 4)		
Common Stock 06/01/202				.1			F ⁽¹⁾	П	933	D	\$53.875	.8757 ⁽²⁾		24,067		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 a	Deemed ecution Date, ny unth/Day/Year)		ansaction of Exp				6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)			unt of crities erlying vative crity (Instr. d 4)			tive derivative ty Securities	Owners Form: Direct (or Indir (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Dat Exe	e ercisable	Expiration Date	n Title	Amount or Number of Shares							

- 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 a weighted average price. These shares were sold by the Reporting Person in multiple transactions at prices ranging from \$53.66 to \$54.35, 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.

Remarks:

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

06/03/2021

** 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.