FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	OMB APPROVA				
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	323			

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

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

1. Name and Address of Reporting Person* Llewelyn Linda			2. Issuer Name and Ticker or Trading Symbol Health Catalyst, Inc. [HCAT]								(Che	eck all app Direc		ng Per	rson(s) to Is 10% Over (see the content of the con	wner			
(Last) (First) (Middle) C/O HEALTH CATALYST, INC. 10897 SOUTH RIVER FRONT PARKWAY, #300			3. Date of Earliest Transaction (Month/Day/Year) 02/15/2023										belov	t) Chief Pec	ople (below) Officer			
(Street) SOUTH JORDAN (City)	V UI		4095 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						6. In Line				on				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acqu Disposed Of (D) (III							Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	Amount	(A) or (D) Pri		Price	Transaction(s) (Instr. 3 and 4)				(111341. 4)				
Common Stock 02/15/2				2023			S ⁽¹⁾		662	Г) ;	\$13.82	2 49	9,045		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)	ve Conversion Date or Exercise (Month/Day/Year) if any		Transaction Code (Instr. 8) Of Der Sec Acq (A) Disport of (I		osed 0) tr. 3, 4	Expiration Dat (Month/Day/Ye		ate Amount		int of rities rlying ative rity (Ir	5 (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 Exercis	able	Expiration Date	Title	Amo or Num of Sha						

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, as Attorney-in-Fact

02/17/2023

** 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.