FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
--

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person* Bullock D Fraser					2. Issuer Name and Ticker or Trading Symbol Health Catalyst, Inc. [HCAT]									ck all app	,	ing Per	rson(s) to I			
(Last) (First) (Middle) C/O HEALTH CATALYST, INC. 3165 MILLROCK DRIVE, #400						3. Date of Earliest Transaction (Month/Day/Year) 09/01/2019									belo			below	,	
(Street) SALT LA	AKE U'	Γ 8	34121		4. If	4. If Amendment, Date of Orig					f Original Filed (Month/Day/Year)					Advividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Execution Date,			3. Transaction Disposed Of (D) (Instr. 3, 4 s) 5)					and Securities Beneficially Owned Foll		es ially Following	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock			09/01/	2019				A		3,557(1)	A	\$0	50.00 3,557 D						
Common	Stock													1,218,287 I					See Footnote ⁽²⁾	
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)	3A. Deel Execution if any (Month/I	on Date,	4. Transa Code (8)	nstr.	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		ıt :r		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)	

Explanation of Responses:

- 1. Represents an award of restricted stock units ("RSUs") granted pursuant to the Issuer's 2019 Stock Option and Incentive Plan (the "2019 Plan"). Each RSU represents a contingent right to receive one share of the Issuer's common stock. Subject to the terms of the 2019 Plan, the RSUs will fully vest on the date of the next Annual Meeting of the Issuer's Stockholders.
- 2. These shares are held directly by HQC Acquisition, LLC. The Reporting Person is the President of HQC Acquisition, LLC and it is controlled by Sorenson Capital Partners. The Reporting Person is a founding member and general partner of Sorenson Capital Partners and disclaims beneficial ownership of these shares held by HQC Acquisition, LLC except to the extent of his pecuniary interest therein.

Remarks:

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

09/03/2019

** 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.