Instruction 1(b).

FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 2	20549
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to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
obligations may continue. See		

**OMB APPROVAL** 3235-0287 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*  Llewelyn Linda					2. Issuer Name and Ticker or Trading Symbol Health Catalyst, Inc. [ HCAT ]										heck all ap Dire  Offi	ationship of Report ( all applicable) Director Officer (give title		10% Ov Other (	wner
(Last) (First) (Middle) C/O HEALTH CATALYST, INC. 10897 SOUTH RIVER FRONT PARKWAY, #300					3. Date of Earliest Transaction (Month/Day/Year) 08/15/2022									A bel	Chief Peo	ople (	below) Officer		
(Street) SOUTH JORDAN	N UT		4095 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Lir	ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or	Ben	efici	ally Ow	ned			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Exec if any	Deemed ecution Date, ny enth/Day/Year)		Transaction Disposed (		ties Acquired (A I Of (D) (Instr. 3			nd Secu Bene Own	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or	Price	Trans	action(s) 3 and 4)			(Instr. 4)
Common Stock 08/15/2				2022			<b>S</b> <sup>(1)</sup>		668	I	)	\$13.	14	57,361		D			
		Tal									osed of, convertib					ed			
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  (Instr. 3)  3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)		ion Date,	4. Transaction Code (Instr. 8)		of	ired r osed ) : 3, 4	Expiration D (Month/Day/		ite	or Num		f g Instr.	8. Price of Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **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

08/16/2022

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.