FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

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

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

1. Name and Address of Reporting Person* <u>Burton Daniel D.</u>					2. Issuer Name and Ticker or Trading Symbol Health Catalyst, Inc. [HCAT]							heck al	ionship of Reportinal applicable) Director		10% O			
(Last) C/O HEA	(Fir	est) (MALYST, INC.	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024									Officer (give tile) pelow) Chief Ex		Other (below) ve Officer	specify	
10897 SOUTH RIVER FRONT PARKWAY, #300				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SOUTH JORDAN	N UT		4095										F	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - No	n-Deriva	tive S	Secur	ities	Acq	uired	, Dis	posed of	, or B	enefici	ally O	wned			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)			Execution Date,		ate,	Transaction Dispos Code (Instr. 5)		Disposed Of	ties Acquired (A) d Of (D) (Instr. 3, 4		id Se Be	Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price	Tr	eported ransaction(s) nstr. 3 and 4)	ction(s)		(Instr. 4)		
Common Stock 03/01/20				024		F ⁽¹⁾		4,973	D \$8.0512		512	12 1,167,650		D				
		Tal	ble II ·								osed of, convertib				ned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed tion Date, n/Day/Year)	4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price Deriva Securi (Instr.	tive derivativ	ve es ally ig d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	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 the Reporting Person.

Remarks:

/s/ Benjamin Landry, as Attorney-in-Fact

03/05/2024

** 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.