FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL										
OMB Number: 3235-02										
Estimated average burden										
hours per respons	e: 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* Gallagher John E					2. Issuer Name and Ticker or Trading Symbol Cue Health Inc. [HLTH]								(Chec	k all appl	onship of Reportin Ill applicable) Director Officer (give title		rson(s) to Is 10% O Other (vner		
C/O CUE HEALTH INC.					3. Date of Earliest Transaction (Month/Day/Year) 12/28/2021								X	below	below) Chief Financi		below)	speemy		
4980 CARROLL CANYON RD. SUITE 100					If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)	EGO C.	A 9	2121										Line)					on		
(City)	(S	tate) (Ž	Zip)												1 0130	,,,,				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/						Execution Da			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Secu Bend Own		cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)		rice	Transa	eported ansaction(s) estr. 3 and 4)			(m3u. 4)	
Common Stock 12/28/20					:021			F		17,452(1)	(1) D \$		15.66	465,668			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)	if any	emed tion Date, n/Day/Year)	4. Transaction Code (Instr. 8)		of Deriv	r osed) r. 3, 4	6. Date Exercisal Expiration Date (Month/Day/Year		ate	e Amount of		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Numb of Share							

Explanation of Responses:

1. The reported shares were withheld to satisfy the reporting person's tax liability in connection with the vesting of restricted stock units.

Remarks:

/s/ Erica Palsis, Attorney-in-Fact for John Gallagher

12/30/2021

** 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.