FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
-------------	------------

Check this box if no longer subject	STATE
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

MENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number: 3235-0287								
	Estimated average burden								
ı	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* Pollard Randall E.					2. Issuer Name and Ticker or Trading Symbol Cue Health Inc. [HLTH]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					wner
(Last)	(Fi E HEALTH	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/05/2023									belov	er (give title v) nief Accou		Other (s below) ng Officer	specify
4980 CARROLL CANYON RD. SUITE 100					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAN DIEGO CA 92121														X	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	$ _{\Box}$	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							posed of					ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Day/Year) Exec		Deemed ecution Date, ny onth/Day/Year)				es Acquired (A Of (D) (Instr. 3,		4 and Secur Benef Owne		cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) (D)	or Pric	е		ted action(s) 3 and 4)			(Instr. 4)	
Common Stock 09/05/2					2023		F		6,186(1)	Г	\$0	\$0.51		316,692(2)(3)		D			
		Tal									osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisabl Expiration Date (Month/Day/Year)		ite	Amou Secur Under Deriva Secur	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owne Form Direct or Ind (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Expiration Exercisable Date T		Title	Amount or Number of Shares							

- 1. The reported shares were withheld to satisfy the reporting person's tax liability in connection with the vesting of restricted stock units ("RSUs").
- 2. The total amount of shares beneficially owned includes an adjustment of 180,000 shares which were inadvertently omitted from Column 5 of Table I of the Form 4 filed on June 7, 2023.
- 3. Includes 265,939 unvested RSUs.

Remarks:

/s/ Erica Palsis, Attorney-in-Fact for Randall Pollard

09/07/2023

** 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.