FORM 4

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

Washington, D.C. 20549

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

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person*     Khattak Ayub K						2. Issuer Name <b>and</b> Ticker or Trading Symbol  Cue Health Inc. [ HLTH ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
IXIIattai	X 1 Iy ub IX				1									X	Direc	tor		10% Ov	vner
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)								X	Office belov	er (give title v)		Other (s below)	specify
C/O CUE HEALTH INC.						06/05/2023										President and CEO			
4980 CARROLL CANYON RD. SUITE 100						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) (State) (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	l - No	n-Deriva	tive S	ecur	ities	Acq	uired,	Dis	oosed of	, or I	Benef	iciall	y Owr	ned			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)					Executi //Year) if any		ution Date,				ies Acquired (A Of (D) (Instr. 3		3, 4 Sec Ben Owr		cially Following	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) (D)	or Pr	ce		ed ction(s) 3 and 4)	(Instr. 4)	1str. 4)	(Instr. 4)	
Common Stock 06/05/2						2023			F		9,064(1)		) §	60.6	.6 11,959,384 <sup>(2)</sup>		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)	ative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)				6. Date Exercisabl Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Inst		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		(A)	(D)			Expiration Date	Title	Amour or Number of Shares	er					

## 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 ("RSUs").
- 2. Includes 898,397 unvested RSUs.

## Remarks:

/s/ Erica Palsis, Attorney-in-Fact for Ayub Khattak

06/07/2023

\*\* 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.