FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

	Check this box if no longer subject
$\overline{}$	to Section 16. Form 4 or Form 5
\cup	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

					1		70(11) 01 1110	investine		ilipally Act t	J. 20									
	nd Address of ez <mark>Maria</mark>	2. Issuer Name and Ticker or Trading Symbol Cue Health Inc. [HLTH]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
111111111	CD IVIUITU				<u> </u>								- ×	X Director		10% Owner		wner		
(Last)	(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/05/2023								Office belov	er (give title v)		Other (s	specify		
C/O CU	4 If A	4. If Amandment, Data of Original Filed (Month/Day/Mass)								6 Individual or Joint/Group Filing (Chack Applicable										
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)						
4 500 C11									\mathbf{x}	X Form filed by One Reporting Person										
														Form filed by More than One Reporting						
(Street)			2121										1	Person						
SAN DI	EGO CA	A 9			<u> </u>	1 5.55														
,				Rule	Rule 10b5-1(c) Transaction Indication															
(City)	(St	ate) (Z	Zip)	in)																
(5.5)					∏ CI	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.														
			L Se	usiy u	ne animany	e delense (contaiti	ons of Rule 1	1002-10	(c). Se	e mstruct	1011 10.								
		Table	l - No	n-Deriva	tive S	ecur	ities Ac	quired,	Dis	posed of	f, or	Ben	eficial	ly Owr	ned					
1. Title of	Security (Ins	tr. 3)		2. Transact	ion	on 2A. Deemed 3. 4. Securities					ies Acquired (A) or			5. Amount of 6		6. Own	ership	7. Nature		
	, ,	•		Date (Month/Day		Execution Date,			Transaction Code (Instr. 5) Disposed Of (D) (Instr. 5)			3, 4 and	4 and Securities Beneficially		Form: I (D) or		of Indirect Beneficial			
				(MOHUI/Da)	//Year) if any (Month/Day/Year)								Owne		l ,	Indirec		Ownership		
									·					Following Reported		(Instr. 4)		(Instr. 4)		
								Code	l۷	Amount	(A	A) or	Price	Transaction(s)		l				
											(D)			(Instr.	3 and 4)					
Common Stock 06/05/20						2023		A		63,300(1)	A	\$0	130,030(2)		Г				
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1. Title of 2. 3. Transaction 3A. Deemed 4.					4.		5.	6. Date	6. Date Exercisable and 7. Title and					8. Price of 9. Numb			r of 10. 1:			
Derivative	Conversion	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)		Transac		Number	Expiration Date (Month/Day/Ye		ite	Amount of			rivative	derivative		wnership	of Indirect		
Security (Instr. 3)	or Exercise Price of				Code (I 8)	nstr.	of Derivative		Dayr	ear)	Securities Underlying			curity str. 5)	Securities Beneficially Owned		rm: rect (D)			
Derivative			`				Securities	:				Derivative		•		or	Indirect			
	Security						Acquired (A) or					Security Instr. 3 and 4)		Following Reported		(I) (Instr. 4	(Instr. 4)	'		
						Disposed					(,		Transac		n(s)	(s)				
							of (D) (Instr. 3, 4								(Instr. 4)					
					and 5)															
								1				Amo	ount							
												or	hor							
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					Code V		(A) (D)	Exercis	Exercisable I		Title Shar		res							
	n of Doonon																			

Explanation of Responses:

1. Grant of restricted stock units ("RSUs") under the Issuer's 2021 Stock Incentive Plan. Each RSU represents a contingent right to receive one share of the Issuer's common stock and is scheduled to vest in full on June 5, 2024.

2. Includes 123,654 unvested RSUs.

Remarks:

/s/ Erica Palsis, Attorney-in-Fact for Maria Martinez

** Signature of Reporting Person

06/07/2023

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.