FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

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

## NT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 Estimated average burden 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 ]									ck all app Direc	licable) tor	ting Person(s) to Is		wner
(Last)	(Fi E HEALTH	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/05/2024									belov	,	unting (	Other (specify below) ng Officer	
4980 CARROLL CANYON RD. SUITE 100				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	'						
(Street) SAN DII	(Street) SAN DIEGO CA 92121												X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City)	(St	ate) (Ž	Zip)	Ru	le 10	)b5-	1(c)	Tran	sac	tion Ind	icatio	on						
					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 - Non-Deri	vative	Secu	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficiall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Da		Date,	Code (Instr.   5)		s Acquired (A) or If (D) (Instr. 3, 4 and			Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									v	Amount	(A) (D)	or I	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock 03/05/			5/2024	/2024		F		7,304	I		\$0.25	25 503,202(1)		D				
		Tal	ole II - Deriv (e.g.,							osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any		Code	Transaction of Code (Instr. Derivative		vative crities cired r osed )	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	y Ow Fo Dir or (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber					

## **Explanation of Responses:**

1. Includes 423,723 unvested RSUs.

## Remarks:

/s/ Joshua Bergmann,

Attorney-in-Fact for Randall 03/07/2024

**Pollard** 

\*\* 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.