

**FORM 3****UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**OMB APPROVAL  
OMB Number: 3235-0104  
Estimated average burden  
hours per response... 0.5**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF  
SECURITIES**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 * <b>KUWAIT INVESTMENT AUTHORITY ON BEHALF OF THE GOVT OF KUWAIT</b>	2. Date of Event Requiring Statement (MM/DD/YYYY) <b>6/1/2016</b>	3. Issuer Name and Ticker or Trading Symbol <b>Nant Health, LLC [NH]</b>
(Last) (First) (Middle) <b>MINISTRIES COMPLEX, BLOCK 3</b>	4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  ____ Director <input checked="" type="checkbox"/> 10% Owner ____ Officer (give title below) _____ Other (specify below)	
(Street) <b>SAFAT, M6 13001</b>	5. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line)  ____ Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person
(City) (State) (Zip)		

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
<b>Common Stock</b>	<b>17857144</b>	<b>I</b>	<b>See explanation of responses <a href="#">(1)</a> <a href="#">(2)</a> <a href="#">(3)</a></b>

**Table II - Derivative Securities Beneficially Owned ( e.g. , puts, calls, warrants, options, convertible securities)**

1. Title of Derivate Security (Instr. 4)	2. Date Exercisable and Expiration Date (MM/DD/YYYY)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

**Explanation of Responses:**

- (1) NHealth Holdings, Inc. directly holds 7,142,857 shares. The sole shareholder of NHealth Holdings, Inc. is the Kuwait Investment Authority, acting for and on behalf of the Government of the State of Kuwait. Because of the relationship between NHealth Holdings, Inc. and the Kuwait Investment Authority, the Kuwait Investment Authority may be deemed to beneficially own the shares directly held by NHealth Holdings, Inc.
- (2) KHealth Holdings, Inc. directly holds 10,714,285 shares. The sole shareholder of KHealth Holdings, Inc. is the Kuwait Investment Office. The Kuwait Investment Office is the London Office of the Kuwait Investment Authority, acting for and on behalf of the Government of the State of Kuwait. Because of the relationship between KHealth Holdings, Inc., Kuwait Investment Office and the Kuwait Investment Authority, the Kuwait Investment Authority may be deemed to beneficially own the shares directly held by KHealth Holdings, Inc.
- (3) The Kuwait Investment Authority, the Kuwait Investment Office (together, the "Reporting Persons") disclaim beneficial ownership of these securities except to the extent of their pecuniary interest therein, and the inclusion of these securities in this report shall not be deemed an admission of beneficial ownership of the reported securities for purposes of Section 16 or for any other purpose.

**Remarks:**

- (4) The Reporting Persons are jointly filing this Form 3 pursuant to Rule 16a-3(j) under the Exchange Act.

**Reporting Owners**

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
<b>KUWAIT INVESTMENT AUTHORITY ON BEHALF OF THE GOVT OF KUWAIT MINISTRIES COMPLEX, BLOCK 3</b>		<b>X</b>		

SAFAT, M6 13001				
Kuwait Investment Office				
15 CARTER LANE		X		
LONDON, X0 EC4V 5EY				

Signatures

/s/ Osama Al Ayoub

6/14/2016

Signature of Reporting Person

Date

/s/ Osama Al Ayoub

6/14/2016

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 5(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 control number.