

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN 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

Name and Address of Reporting Person *					2.	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Louks Ronal	ld Allen				N	antI	Healt	h, Inc. [NH	[]							
(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)								Director10% Owner X Officer (give title below) Other (specify below)					
C/O NANTHEALTH, INC., 9920 JEFFERSON BLVD.								12/	/6/2	017			Chief Operat	•		omer (speer	iy ociow)
	(Stre	eet)			4.	If An	nendm	ent, Date (Origi	inal Fil	led (MM/	DD/YYYY)	6. Individual	or Joint/G	roup Filing	Check Appl	icable Line)
CULVER C	ITY, CA		o)										_ X _ Form filed l		rting Person One Reporting P	erson	
		,	Table	: I - No	on-Dei	ivati	ive Sec	curities Ac	qui	red, D	isposed	of, or Be	neficially Own	ed			
1. Title of Security (Instr. 3) 2. Trans. D				2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	de	Dispose	sed of (D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. 7. Nature Ownership Form: Beneficial			
								Code	V	Amoun	(A) or (D)	Price				Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock				12/6/2	2017			M		10000	A	<u>(1)</u>		89690		D	
Common Stock				12/6/2	2017			F		4755	D	\$3.03		84935		D	
Common Stock 12/6/2017				2017			S		5245	D	\$3.03 (3)	79690			D		
	Tab	le II - Deri	vativo	e Secu	rities]	Bene	ficially	y Owned (e.g.	, puts	, calls,	warrants	, options, conve	rtible sec	urities)		
Security Conversion Date Exe		3A. Do Execu Date, i	tion	4. Trans. Code (Instr. 8)		Derivat Securiti (A) or I (D)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date		d 7. Title an Securities Derivative (Instr. 3 and	Inderlying Derivative Security Security		derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	V	(A)	(D)	Date Exer	e rcisable	Expiration Date	¹ Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)	
Restricted Stock Units	<u>(1)</u>	12/6/2017			M			10000		<u>(2)</u>	<u>(2)</u>	Commo Stock	n 10000	\$0.00	100000	D	

Explanation of Responses:

- (1) Each restricted stock unit ("RSU") is the economic equivalent of one share of NantHealth, Inc. common stock.
- (2) Subject to the Reporting Person's continuing to be a service provider (as defined in the 2016 Equity Incentive Plan) through each applicable vesting date, 40,000 RSUs shall vest on October 6, 2017, with the remaining 120,000 RSUs to vest monthly in equal amounts for 12 months, beginning on November 6, 2017. Upon vesting, the issuer will withhold shares sufficient to satisfy tax withholding obligations; the issuer will then be responsible for remitting a cash payment for the related withholding taxes; and the issuer will issue to the Reporting Person a net lower number of shares. In addition, upon vesting, the issuer and the Reporting Person have agreed that the issuer will repurchase the remaining shares at the then current market value.
- (3) Pursuant to the terms of the grant, the Issuer repurchased the shares at a price per share equal to the closing price on the date of vesting.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Louks Ronald Allen C/O NANTHEALTH, INC. 9920 JEFFERSON BLVD. CULVER CITY, CA 90232			Chief Operating Officer					

Signatures

/s/ Charles Kim, as Attorney-in-Fact

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 control number.