

[] 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

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

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

| 1. Name and Address of Reporting Person * | | | | 2. 1 | 2. Issuer Name and Ticker or Trading Symbol | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|--|---|--------------|--|-------------|--|-----------|---------------------------------------|---------------|--|--------------------|---|---|---|---|---|--|
| Louks Ronal | d Allen | | | Na | antl | Health | , Inc. [] | NH |] | | | | , | | 00/ 0 | |
| (Last) (First) (Middle) | | | | 3. 1 | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | | X Director X Officer (s | rive title held | | 0% Owner Other (speci | fy below) |
| C/O NANTHEALTH, INC., 9920 JEFFERSON BLVD. | | | | | | | 9/0 | 6/20 | 18 | | See Remarks | - | ·w) | omer (speer | ry ociow) | |
| | (Stre | | | 4.] | lf Ar | nendme | ent, Date C | Origin | al Fil | ed (MM/I | DD/YYYY | 6. Individual | or Joint/G | roup Filing | Check Appl | icable Line) |
| CULVER CITY, CA 90232 (City) (State) (Zip) | | | | | | | | | | | | _ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | | Table I - | - Non-Der | ·ivat | ive Sec | urities Ac | quire | ed, D | isposed | of, or Be | eneficially Own | ed | | | |
| 1. Title of Security (Instr. 3) | | | Trans. Date | Exec | Deemed ecution te, if any 3. Trans. Co | | | or Dis | urities Acc posed of (1 3, 4 and 5 | Ď) (| 5. Amount of Securi Following Reported (Instr. 3 and 4) | | | | 6. 7. Nature Ownership Form: Beneficial | |
| | | | | | | | Code | V | Amou | (A) or | r Price | | | | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) |
| Common Stock | | | | 9/6/2018 | | | M | | 10000 |) A | <u>(1)</u> | 1 | 177391 | | D | |
| | | | | 9/6/2018 | | | F | | 3695 | D | \$1.89 | 173696 | | | D | |
| Common Stock 9/6/201 | | | | 9/6/2018 | | | S (2) | | 6305 | D | \$1.89 | 167391 | | D | | |
| | Tab | le II - Deri | ivative So | ecurities l | Bene | eficially | Owned (| e.g. , | , puts | , calls, v | varrants | s, options, conve | ertible sec | urities) | | |
| 1. Title of Derivate Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative | e | 3A. Deeme Execution Date, if any | (Instr. 8) | 5. Code Derivative Acquired Disposed (Instr. 3, 4 | | ve Securities d (A) or d of (D) | | te Exercisable and ration Date | | Securities | Underlying e Security | Inderlying Derivative Security Security | | Ownership Form of Derivative Security: | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | Security | | | Code | V | (A) | (D) | Date Exerc | isable | Expiration Date | Title | Amount or Number of Shares | | Following Reported Transaction(s) (Instr. 4) | Direct (D) or Indirect (I) (Instr. 4) | |
| Restricted Stock Units | <u>(1)</u> | 9/6/2018 | | M | | | 10000 | (| 2) | <u>(2)</u> | Commo Stock | n 10000 | \$0.00 | 10000 | 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 vested 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.

Remarks:

Chief Operating Officer & Director

Reporting Owners

| 1 0 | | | | | | | |
|---|---------------|-----------|-------------|-------|--|--|--|
| Panorting 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 | X | | See Remarks | | | | |

Signatures

/s/ Brandon Villery, 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.