| SEC Form 4 |
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FORM 4

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

OMB APPROVAL

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 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 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person [*] Cruz Shane E. | | | | uer Name and Tick Health, Inc. [| 0 | Symbol | (Check | ationship of Reportin all applicable) Director Officer (give title | Issuer Owner (specify | | | |
|---|--|----------------|---------|--|------------------|---------------------------|------------------------|---|-----------------------------|-----------|--|--|
| (Last) 214 WEST HU | (First) URON ST. | (Middle) | | te of Earliest Trans 5/2023 | action (Month | 'Day/Year) | X | below) | below tegy Officer | | | |
| (Street) CHICAGO (City) | IL (State) | 60654 (Zip) | 4. If A | Amendment, Date o | f Original Filed | l (Month/Day/Year) | 6. Indiv Line) X | vidual or Joint/Grou Form filed by On Form filed by Mo Person | e Reporting Per | rson | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac | | | | 2A. Deemed | 3. | 4. Securities Acquired (A | | 5. Amount of | 6. Ownership | 7. Nature | | |

| | Date (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transa Code (8) | | Disposed Of (5) | | | | (D) or Indirect | of Indirect Beneficial Ownership (Instr. 4) |
|----------------------|--------------------------|---|------------------------|--|-------------------------------|---------------|----------------------|------------------------------------|-----------------|--|
| | | | Code V | | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130.4) |
| Class A Common Stock | 04/25/2023 | | F | | 12,011 ⁽¹⁾ | D | \$ <mark>9.36</mark> | 186,083 | D | |
| Class A Common Stock | 04/25/2023 | | F | | 7 , 876 ⁽²⁾ | D | \$9.36 | 178,207 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv | r osed) 1. 3, 4 | 6. Date Exerc Expiration Da (Month/Day/Y | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---|---|--|---|------------------------------|---|-------------|---------------------------|--|---|-------|---|--|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Represents shares withheld by the Company to satisfy tax withholding obligations in connection with the vesting of 38,095 restricted stock units granted to the reporting person on April 25, 2022.

2. Represents shares withheld by the Company to satisfy tax withholding obligations in connection with the vesting of 17,777 restricted stock units granted to the reporting person on June 22, 2022. Remarks:

/s/ Kasey Wroblewski,

Attorney-in-fact ** Signature of Reporting Person Date

04/27/2023

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.