FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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* Weightman Walter Bradford						2. Issuer Name and Ticker or Trading Symbol UpHealth, Inc. [UPH]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title below) former officer					vner
(Last) (First) (Middle) C/O UPHEALTH, INC. 1731 EMBARCADERO ROAD, SUITE 200						3. Date of Earliest Transaction (Month/Day/Year) 06/09/2021													,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(Street) PALO ALTO CA 94303 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indi Line) X	,				
Table I - Non-Derivative Securities Acquired, Disposed of, or Benefici														cially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)						Exec if an	Deemed cution Date, y nth/Day/Year)		3. 4. Securiti Disposed (5) Code (Instr. 8) Amount		es Acquired (A) o Of (D) (Instr. 3, 4 a (A) or (D) Price		l and	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
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) 1. Title of Conversion or Exercise (Instr. 3) 1. Transaction Date (Month/Day/Yet Security)			3A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Der Sed (Ins	Price of rivative curity str. 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 Exercis	able	Expiration Date	Title	Amount or Number of Shares	r					

Explanation of Responses:

Walter Bradford Weightman 06/10/2021

Date

** Signature of Reporting Person

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.