

[] 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

Name and Address of Reporting Person *					2. I	2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Eberhard M	ichael L.				CA	AST	LIGH	IT HEA	LT	H, II	NC. [(CSL	T]					
(Last) (First) (Middle)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)								X_ Director10% Owner					
					(40)2004							Officer (giv	Officer (give title below) Other (specify below)					
C/O CASTLIGHT HEALTH, INC., 150						6/10/2021												
SPEAR STREET, SUITE 400																		
(Street)					4. I	4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual o	6. Individual or Joint/Group Filing (Check Applicable Line)				
SAN FRANCISCO, CA 94105 (City) (State) (Zip)														X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
1.774 .00 .4											•			eneficially Owner		11.0.1	6.	7.11
1.Title of Security (Instr. 3) 2. Trans. D						3. Trans. Co (Instr. 8)	de 4. Securities Acq or Disposed of (I (Instr. 3, 4 and 5)) Fol			Amount of Securities Beneficially Owned ollowing Reported Transaction(s) nstr. 3 and 4)			7. Nature of Indirect Beneficial Ownership			
								Code	V	Amou	(A) (D)		rice				Direct (D) or Indirect (I) (Instr. 4)	
Class B Common Stock 6/10/202			21			A		70707	(<u>1</u>) A	\$0.	.00	4	125809		D			
	Tak	ole II - Dei	rivative	e Secur	ities	Bene	eficially	Owned (e.g.,	puts,	calls, w	arrai	nts,	, options, conver	tible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Dee Execution Date, if	ecution (Inst		Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date					es Underlying ve Security	nderlying Derivative Security		Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Coo	Code	V	(A)	(D)	Date Exer	cisable	Expiration Date	Title		mount or Number of nares		Transaction(s)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

(1) Represents an award of restricted stock units ("RSUs"). 25% of the RSUs will vest on August 16, 2021, and the remaining 75% of the RSUs will vest in 3 equal quarterly installments thereafter beginning on November 16, 2021. Each RSU represents a contingent right to receive one share of the Issuer's Class B common stock upon settlement for no consideration.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Eberhard Michael L. C/O CASTLIGHT HEALTH, INC. 150 SPEAR STREET, SUITE 400 SAN FRANCISCO, CA 94105	X							

Signatures

/s/ Mary Ahern, as attorney-in-fact

**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 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.