FORM 5

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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| | | |

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

| | OMB APPROVAL | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0362 | | | | | | | | |
| | Estimated average burden | | | | | | | | | |
| - | houre per recogness. | 1.0 | | | | | | | | |

Form 3 Holdings Reported.

| X Form 4 | 4 Transactions | Reported. | Filed | d pursuant to S or Section 3 | | | | | | | | | | | | | | |
|--|---|---|---|--|---|-----------------------------------|--------------|---|--|---|---|---|---|--|-------------------------------|--------------------------------|---|-----------------------------------|
| Name and Address of Reporting Person* Cavanaugh Robert N | | | | 2. Issuer Name and Ticker or Trading Symbol Accolade, Inc. [ACCD] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify | | | | | | | |
| (Last) | (Fii | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 02/28/2022 | | | | | | | Year) | X Officer (give title Offier (specify below) President | | | | | | | | |
| (Street) SEATTL (City) | LE WA | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | |
| | | Table | I - Non-Deriva | ative Secu | rities | s Acc | quire | ed, Dis | posed | of, | or E | Benefic | iall | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year | | | Date | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. | | | | | or Dispose | d | 5. Amou Securitie Benefici Owned a | es | 6. Owne Form: (D) or | rship : Direct | 7. Nature of Indirect Beneficial Ownership | |
| | | | | (| | | | Amoun | nt (A) | | r _P | Price | | Issuer's | | Indirect (I) (Instr. 4) | | (Instr. 4) |
| Common Stock 05/20/2021 | | | | A4 | | | 641 | | A | \$42.68(1) | | 1) | 137,107 | | D | | | |
| | | Ta | ble II - Derivat (e.g., p | ive Securi uts, calls, v | | | | | | | | | | Owne | d | | | |
| 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. Transaction Code (Instr. 8) | of Deriv Secu Acqu (A) o Dispo | r osed) r. 3, 4 | Expi (Mor | Expiration Date (Month/Day/Year) Date Expiration | | Amount of Securities Underlying Derivative Security (Ins: 3 and 4) Amou or Numb of | | int of rities rlying ative rity (Instr. 4) Amount or Number | De Se | . Price of berivative security instr. 5) Securition Securition Owned Followin Reporter Transac (Instr. 4) | | Owners Form: Direct (or Indir | | Benefic Owners ct (Instr. 4 |

Explanation of Responses:

1. The reporting person is voluntarily reporting the acquisition of the Issuer's common stock pursuant to the Accolade, Inc. 2020 Employee Stock Purchase Program ("ESPP"), for the ESPP purchase period of commencing on November 21, 2020 through May 20, 2021, which was the last day of the ESPP offering period (such period, the "Purchase Period"). This transaction is also exempt from Rule 16b-3(c). In accordance with the ESPP, these shares were purchased at the lesser of (i) 85% of the fair market value of such shares of Common Stock on the first trading day of the Purchase Period, and (ii) 85% of the fair market value of such shares of Common Stock on the last day of the applicable Purchase Period, in each case rounded up to the nearest whole cent per share.

/s/ Richard Eskew, Attorney-

03/01/2022

in-Fact

** 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.