FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington,	D.C.	20549	
rasi iii igtori,	D.C.	20040	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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* NABEL ELIZABETH G					2. Issuer Name and Ticker or Trading Symbol Accolade, Inc. [ACCD]								(Ch	telationship eck all appli X Directo			son(s) to Iss		
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/25/2023										Officer (give title below)		Other (s below)	pecify
C/O ACO	COLADE, I	INC.			4. If /	Amer	ndme	nt, Date	of Original	Filed	(Month/D	ay/Year)	6. Ir	ndividual or	Joint/Group	Filin	g (Check Ap	plicable
1201 THIRD AVENUE, SUITE 1700					,									X Form filed by One Reporting Person					
(Street) SEATTL	E W	7Δ	98101													iled by Mor		n One Repo	
JEAI IL	, L. VV	А	30101		- Ru	Rule 10b5-1(c) Transaction Indication													
(City)	(S	tate)	(Zip)		$ _{\Box}$	Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In							to a con Instructi	intract, instruction or written plan that is intended to tition 10.					
		Tab	le I - Noi	n-Deriv	ative	Sec	curit	ies Ac	quired,	Disp	osed o	of, or I	Bene	eficial	ly Owne	d			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,		Transaction Dispose Code (Instr. 5)		urities Acquired (A) ed Of (D) (Instr. 3, 4			Benefici Owned	es ially Following	Form (D) o	n: Direct or Indirect onstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		A) or O)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock 07/25/					5/2023				M		14,00	50	Α	(1)	(1) 18,817			D	
		Т	able II -						uired, D , option						Owned		,	<u> </u>	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	ed Date,	4. Transactio Code (Inst 8)		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	OI Ni Of	umber					
Restricted Stock Units	(2)	07/25/2023			М			14,060	(3)		(3)	Commo		4,060	(2)	0		D	

Explanation of Responses:

- $1. \ Each \ Restricted \ Stock \ Unit \ ("RSU") \ converted \ into \ one \ share \ of \ the \ Issuer's \ common \ stock.$
- 2. Each RSU represents the contingent right to receive one share of the Issuer's Common Stock upon vesting of the RSU.
- 3. The shares subject to the RSU will vest on the earlier of (i) the date of the following annual meeting of the Issuer's stockholders (or the date immediately prior to the next annual meeting of the Issuer's stockholders if the Reporting Person's service as a director ends at such meeting due to the Reporting Person's failure to be re-elected or the director not standing for re-election) or (ii) the one year anniversary measured from the date of grant, each subject to continued service as a director through each applicable vesting date.

/s/ Richard Eskew, Attorney-

07/27/2023

** 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 Number.