FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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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* Knowlton Calvin H (Last) (First) (Middle) 228 STRAWBRIDGE DRIVE SUITE 100						Issuer Name and Ticker or Trading Symbol Tabula Rasa HealthCare, Inc. [TRHC] One of Earliest Transaction (Month/Day/Year) O6/14/2017 If Amendment, Date of Original Filed (Month/Day/Year)									Offic Offic below (widual of	ctor er (give title w) Chief Exector Joint/Group	X 10% Owner Other (specify below) utive Officer Distilling (Check Applicable			
(Street) MOORESTOWN NJ 08057 (City) (State) (Zip)															Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - I	Non-Deriv	ative \$	Secu	ırities	s Ac	quired,	Dis	posed o	f, or E	Benefic	ially	Own	ed				
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/Y					Year) i	Execution Date,			3. Transaction Code (Instr. 8) 4. Securiti Disposed 5)					4 and Secur		ficially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)		•	Reported Transaction(s) (Instr. 3 and 4)				, ,	
Common Stock 06/14/203)17	17			S ⁽¹⁾		8,000	D	\$14	.02(2)	907,117 ⁽³⁾		I		Held by spouse.	
Common Stock														<u> </u>		918,362(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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	Deemed ution Date, / th/Day/Year)		s. Numbor of Derivative Securitie Acquirec (A) or Dispose of (D) (Instr. 3, and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amoun or Numbe of Title Shares		of Der Sec (Ins	rice ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct or Indi (I) (Ins 4)	D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by Orsula V. Knowlton on May 4, 2017.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions ranging from \$13.72 to \$14.41, inclusive. The reporting person undertakes to provide to Tabula Rasa HealthCare, Inc., any security holder of Tabula Rasa HealthCare, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each price within the ranges set forth in footnote (2) to this Form 4.
- 3. Orsula Knowlton received a restricted stock award of 267,268 shares of the Company's common stock on September 28, 2016. All such shares of common stock were scheduled to vest on May 31, 2017. Notwithstanding the foregoing, on June 12, 2017, the Company entered into an amendment to the restricted stock award with Orsula Knowlton and, pursuant thereto, all shares underlying such restricted stock award will now vest in full on May 31, 2018.
- 4. Dr. Knowlton received a restricted stock award of 337,307 shares of the Company's common stock on September 28, 2016. All such shares of common stock were scheduled to vest on May 31, 2017. Notwithstanding the foregoing, on June 12, 2017, the Company entered into an amendment to the restricted stock award with Dr. Knowlton and, pursuant thereto, all shares underlying such restricted stock award will now vest in full on May 31, 2018.

/s/ Brian W. Adams, Attorneyin-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.