| | FORM 4 |
|--------|---|
| | Check this box if no longer subject to Section 16. |
| | Form 4 or Form 5 obligations may continue. See |
| | Instruction 1(b). |
| | Check this box to indicate that a transaction was |
| | made pursuant to a contract, instruction or written |
| | plan for the purchase or sale of equity securities of |
| | the issuer that is intended to satisfy the affirmativ |
| | defense conditions of Rule 10b5-1(c). See |
| | Instruction 10. |
| (Print | or Type Responses) |

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

| OMB APPROVAL | |
|-----------------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burden hours pe | er |
| response | 0.5 |

| 1. Name and Address of R Phillip Frost, M.D., ET AI | | | 2. Issuer Name and Ticker or Trading Symbol OPKO Health, Inc. [OPK] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner |
|--|----------|----------|---|---|
| (Last) OPKO Health, Inc. 4400 Biscayne Blvd. | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 03/28/2025 | XOfficer (give title below)Other (specify below) CEO & Chairman |
| Miami, FL 33137 | (Street) | | 4. If Amendment, Date Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person _ X _ Form filed by More than One Reporting Person |
| (City) | (State) | (Zip) | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month /Day/Year) | 2A. Deemed Execution Date, if any (Month/Day /Year) | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: | Beneficial |
|-----------------------------------|---|---|--------------------------------------|---|---|---------------|------------------|---|--|-------------------------|
| | | | Code | V | Amount | (A) or (D) | Price | | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) |
| Common Stock | 03/28/2025 | | P | | 150,000 | A | \$ 1.6959 (1) | 213,651,448 | I | See Footnote (2) |
| Common Stock | | | | | | | | 3,568,951 | D | |
| Common Stock | | | | | | | | 30,127,177 | I | See Footnote (3) |

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) | or Exercise | 3. Transaction Date (Month /Day/Year) | 3A. Deemed Execution Date, if any (Month/Day /Year) | 4. Transacti Code (Instr. 8) | ion | 5. Number Derivative Acquired (A Disposed o (Instr. 3, 4, | Securities A) or f (D) | 6. Date Exercisabl Date (Month/Day/Year) | • | Under | e and Amount of dying Securities 3 and 4) | 8. Price of Derivative Security (Instr. 5) | of Derivative Securities Beneficially | Ownership Form of Derivative Security: | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|-------------|---|---|------------------------------------|-----|---|------------------------------|--|-----------------|-------|---|---|--|---|--|
| | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Following Reported | Direct (D) or Indirect (I) (Instr. 4) | |

| | | | | _ |
|-------------------|---|----|------------------------------------|-----------|
| | nd Address of Reporting Person* rost, M.D., ET AL | | | |
| | (First) Jealth, Inc. Scayne Blvd. | | (Middle) | |
| (Street) Miami | FL | | 33137 | |
| (City) | (State) | | (Zip) | |
| Relationsh | ip of Reporting Person(s) to Issue | er | | , |
| X X | Director Officer (give title below) CEO & Chairman | X | 10% Owner Other (specify below) | |
| | nd Address of Reporting Person* mma Investments Trust | | | |
| | (First) Jealth, Inc. Scayne Blvd. | | (Middle) | |
| (Street) Miami | FL | | 33137 | |
| (City) | (State) | | (Zip) | |
| Relationsh | ip of Reporting Person(s) to Issue | er | | |
| | Director Officer (give title below) | X | 10% Owner Other (specify below) | _ |

Explanation of Responses:

- 1. The price reported is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$1.685 to \$1.70, inclusive. The reporting person undertakes to provide to OPKO Health, Inc. (the "Company"), any security holder of the Company or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in footnote (1) to this Form 4.
- 2. The securities are held by Frost Gamma Investments Trust, of which Phillip Frost M.D., is the trustee. Frost Gamma L.P. is the sole and exclusive beneficiary of Frost Gamma Investments Trust. Dr. Frost is one of two limited partners of Frost Gamma L.P. The general partner of Frost Gamma L.P. is Frost Gamma, Inc., and the sole shareholder of Frost Gamma, Inc. is Frost-Nevada Corporation. Dr. Frost is also the sole shareholder of Frost-Nevada Corporation. The reporting person disclaims beneficial ownership of these securities, except to the extent of any pecuniary interest therein and this report shall not be deemed an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.
- 3. These securities are held by Frost Nevada Investments Trust, of which the Reporting Person is the trustee and Frost-Nevada, L.P. is the sole and exclusive beneficiary. The Reporting Person is one of seven limited partners of Frost-Nevada, L.P. and the sole shareholder of Frost-Nevada Corporation, the sole general partner of Frost-Nevada, L.P. The reporting person disclaims beneficial ownership of these securities, except to the extent of any pecuniary interest therein and this report shall not be deemed an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.

Phillip Frost, M.D., Individually and as Trustee 03/28/2025

** 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.

JOINT FILER INFORMATION

Name: Frost Gamma Investments Trust

Address:

4400 Biscayne Blvd. Miami, FL 33137

Designated Filer: Phillip Frost, M.D.

Issuer Name and Ticker Symbol: OPKO Health, Inc. (OPK)

Date of Earliest Transaction: March 28, 2025

Relationship to Issuer: 10% Owner

FROST GAMMA INVESTMENTS TRUST

By: /s/ Phillip Frost, M.D., as Trustee Phillip Frost, M.D., Trustee