FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIAL	. OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burd	en
l	hours per response:	0.5

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

	nd Address of TT MICH	Reporting Person* HAEL O							cker or Tra					Relationship Check all appli X Direct	cable)	ting Per	son(s) to I	
(Last) (First) (Middle) C/O HEALTHEQUITY, INC.						3. Date of Earliest Transaction (Month/Day/Year) 07/11/2016									r (give title )	give title Other below		(specify )
15 W. SC	CENIC POI	NTE DR., STE.	100		4. I	f Amer	ndmen	t, Date	of Origina	l Filed	d (Month/D	ay/Year)		Individual or	Joint/Gro	up Filin	g (Check A	Applicable
(Street)  DRAPEI	R U'	Γ	84020												filed by M		orting Per n One Rep	
(City)	(S	tate)	(Zip)															
		Tab	le I - No	n-Deriv	vative	Sec	curiti	es Ac	quired,	Dis	posed	of, or Be	eneficia	ally Owne	d			
1. Title of Security (Instr. 3)  2. Transar Date (Month/Date)				Execut ay/Year) if any		ned n Date, Day/Yea	Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		Beneficially Owned Followin		6. Ownersh Form: Direc (D) or Indirec (I) (Instr. 4)	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Transacti	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 07/11/				L/2016	2016		G	V	2,900	) D	\$0	13,	13,767		T I	See Footnote <sup>(1)</sup>		
Common Stock													30,	30,000		D		
		Т	able II -									, or Ben ble sec		y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion Oate (Month/Day/Year) 3A. Deem Execution Date (Month/Day/Year) if any (Month/Day/Year) (Month/Day/Year)		Date, Transaction Code (Inst			on of		6. Date Exercisable a Expiration Date (Month/Day/Year)		!	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)			10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		expiration Pate	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$21.27								(2)	0	2/01/2026	Common Stock	15,000		15,0	00	D	
Stock Option (right to buy)	\$25.39								(3)	0	3/26/2025	Common Stock	15,000		15,0	00	D	
Stock Option (right to	\$14								(3)	0	7/30/2024	Common Stock	15,000		15,0	00	D	

## Explanation of Responses:

- 1. Shares held directly by Third Chapter, Inc. ("Third Chapter"), an entity controlled by the reporting person. The reporting person disclaims beneficial ownership of the shares held by Third Chapter except to the extent of his pecuniary interest therein and this report shall not be deemed an admission that the reporting person is the beneficial owner of the shares held by Third Chapter for any other purposes
- 2. The option became exercisable as to 7,500 shares upon the reporting person's reelection to the issuer's board of directors at the issuer's 2016 Annual Meeting of Stockholders held on June 23, 2016. The remaining 7,500 shares will become exercisable on January 31, 2017; provided, that the reporting person continues to serve as a director of the issuer through such date.
- 3. The option is immediately exercisable.

/s/ Michael O. Leavitt

07/19/2016

\*\* 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.