Instruction 1(b)

Form 2 Holdings Deported

FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	205/10
wasiiiigton,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0362
l	Estimated average burd	en
l	hours per response:	1.0

	i ioluliya Kep	orteu.															
Form 4	1 Transactions	Reported.	Fil	ed pursuant t or Sectio					urities Excha Company Ad		of 1934						
1. Name and Address of Reporting Person* <u>LEAVITT MICHAEL O</u>				2. Issuer Name and Ticker or Trading Symbol HEALTHEQUITY INC [HQY]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(Fi	•	(Middle)		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 01/31/2016						'ear)	Officer (give title Other (specify below)					
15 W. SCENIC POINTE DR., STE. 100					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) DRAPER UT 84020				_								X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)														
		Tab	le I - Non-Deri	vative Sec	uriti	ies A	cquire	ed, D	isposed	of, or I	Beneficia	lly Owne	d				
, ,		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.			4. Securities Acquired (A) or Dispose Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at end o		6. Ownership Form: Direct of (D) or		7. Nature of Indirect Beneficial Ownership		
					(3,		unt	(A) or (D)	Price	Issuer's	suer's Fiscal India ear (Instr. 3 and (Inst		ect (I) (Instr. 4)		
Common	Stock		10/01/2015				G	1	5,000	D	\$0	51,	51,000		I See footnote		
Common Stock										30,	30,000		D				
		Т	able II - Deriva (e.g., p	tive Secu outs, calls								y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	rcise (Month/Day/Year) of tive	Execution Date, if any	Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D or Indire (I) (Instr.	Benefici Ownersi (Instr. 4)		
					(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						
Stock Option (right to buy)	\$25.39						(2)		03/26/2025	Commo Stock	n 15,000		15,0	00	D		
Stock Option (right to	\$14						01/31/2	2015	07/30/2024	Commo Stock	n 15,000		15,000		15,000 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 2015 Annual Meeting of Stockholders held on June 24, 2015. The remaining 7,500 shares became exercisable on January 31, 2016.

/s/ Michael Leavitt

** Signature of Reporting Person

 $\frac{03/09/2016}{\text{Date}}$

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.