FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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	OMB APPROVAL								
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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* <u>Corvino Frank</u>						2. Issuer Name and Ticker or Trading Symbol HEALTHEQUITY INC [HQY]										Relationshi leck all app X Direc	licable)	•				
	ALTHEQUI	TTY, INC.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/01/2018									Office below	er (give title /)		Other (s below)	specify			
15 W. SCENIC POINTE DR., STE. 100					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable						
(Street) DRAPER UT 84020				-											Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)																			
		Tab	le I - Noi	n-Deriv	/ative	Se	curiti	es A	cqu	ıired,	Disp	osed o	of, or	Ben	eficial	ly Owne	d					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D.						Execution Date,		Code (Insti			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Benefi	ially (D) (Following (I) (I		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
										Code	v	Amount	int (A) or		Price	Transa	Transaction(s) (Instr. 3 and 4)			(11150.4)		
Common Stock 02/01					1/2018	018			A		3,273 ⁽¹⁾ A		A	\$0	(,829		D				
	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)	3A. Deemo Execution if any (Month/Da	Date,	Transaction of I			6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)					ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Dat	te ercisable		piration te	Title	OI N	umber							
Stock Option (right to buy)	\$21.27									(2)	02	/01/2026	Commo Stock		5,000		15,000	J	D			
Stock Option (right to buy)	\$14									(3)	07	/30/2024	Commo		2,500		12,500	0	D			

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of the issuer's common stock. The restricted stock units vest as to 1,636 shares on the date of the issuer's annual stockholder meeting held in the current fiscal year; the remainder will vest on January 31, 2019. Vested shares will be delivered to the reporting person upon vesting.
- 2. The option is immediately exercisable
- 3. The option is exercisable as to 6,250 shares. The option becomes exercisable as to the remaining shares on June 30, 2018.

Remarks:

The Power of Attorney given by Mr. Corvino was previously filed with the U.S. Securities & Exchange Commission on February 3, 2017, as an exhibit to a statement on Form 4 filed by Mr. Corvino with respect to HealthEquity, Inc. and is hereby incorporated by reference.

/s/ Delano W. Ladd, attorneyin-fact

02/05/2018

** 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.