### SEC Form 4

# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

## 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

3235-0287 OMB Number: Estimated average burden hours per response: 0.5

1. Name and Add <u>Kessler Jon</u>	ress of Reporting P	erson*	2. Issuer Name and Ticker or Trading Symbol HEALTHEQUITY INC [ HQY ]		ionship of Reporting Pers all applicable) Director	on(s) to Issuer 10% Owner
(Last) 15 W. SCENIO	(First) C POINTE DR.,	(Middle) STE. 100	3. Date of Earliest Transaction (Month/Day/Year) 07/25/2016	X	Officer (give title below) President and	Other (specify below) CEO
(Street) DRAPER (City)	UT (State)	84020 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	dual or Joint/Group Filing Form filed by One Repo Form filed by More thar Person	orting Person
	(0.0.0)		ative Securities Acquired, Disposed of, or Benefi	ially C	Dwned	

#### 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)			4. Securities Disposed Of			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common Stock	07/25/2016		<b>M</b> <sup>(1)</sup>		10,000	A	\$1.25	430,000	D	
Common Stock	07/25/2016		<b>S</b> <sup>(1)</sup>		10,000	D	\$29.6182 <sup>(2)</sup>	420,000	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. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (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. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to buy)	\$1.25	07/25/2016		<b>M</b> <sup>(1)</sup>			10,000	(3)	08/08/2021	Common Stock	10,000	\$0	410,000	D	
Stock Option (right to buy)	\$0.1							(3)	03/26/2019	Common Stock	230,000		230,000	D	
Stock Option (right to buy)	\$14							(3)	07/30/2024	Common Stock	40,000		40,000	D	

### Explanation of Responses:

1. The option exercises and subsequent sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 16, 2015.

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$29.47 to \$29.85, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote (2) to this Form 4.

3. The option is immediately exercisable.

/s/ Jon Kessler

07/27/2016 \*\* 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.