FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Kessler Jon						2. Issuer Name and Ticker or Trading Symbol HEALTHEQUITY INC [ HQY ]								ationship of k all applica Director	Reporting Perso		n(s) to Issu 10% Ow		
(Last) (First) (Middle) 15 WEST SCENIC POINTE DRIVE, SUITE 100					3. Date of Earliest Transaction (Month/Day/Year) 03/26/2019								X Officer (give title Other (specify below)  President and CEO						
(Street) DRAPER UT 84020 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
Date				2. Transac			d Date,	ate, 3. Transa Code (		4. Securiti	ies Acquired (A) or Of (D) (Instr. 3, 4 and			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)	
Common Stock								Code	v	Amount	(A) o (D)	r Pric	e	Transaction (Instr. 3 and 432,	id 4)		D		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	e.g., pu	ve Se its, ca saction (Instr.	5. Number Derivative Securities Acquired (ADisposed of	5. Number of Derivative Securities Acquired (A) or Disposed of D) (Instr. 3, 4		ired, Dispose options, con 6. Date Exercisable Expiration Date (Month/Day/Year)		ertible secu		) unt ity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivativ Securitie Beneficia Owned Following Reported Transact	e Over State of State	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	· v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Sha	er		(Instr. 4)				
Stock Option (right to buy)	\$41.28							(1)		03/27/2027	Common Stock	52,2	229		52,22	29	D		
Stock Option (right to buy)	\$61.72							(2)		03/27/2028	Common Stock	47,8	359		47,85	59	D		
Stock Option (right to buy)	\$73.61	03/26/2019		A		51,125		(3)		03/26/2029	Common Stock	51,1	125	\$0	51,12	25	D		
Stock Option (right to	\$14	03/26/2019		A		160,000 <sup>(4)</sup>		(5)		07/30/2024	Common	160,	000	\$0	160,0	00	D		

## **Explanation of Responses:**

- 1. The option became exercisable as to 17,410 shares on March 27, 2019. The options will vest as to 17,410 shares on March 27, 2020. The remaining 17,409 shares will vest on March 27, 2021.
- 2. The option became exercisable as to 11,965 shares on March 27, 2019. The options will vest as to 11,965 shares on each of March 27, 2020, and 2021. The option becomes exercisable as to the remaining 11,964
- 3. The option will vest as to 12,782 shares on March 26, 2020. The remaining options will vest in annual installments of 12,781 on each of March 26, 2021, 2022 and 2023.
- 4. On July 30, 2014, the reporting person was granted an option to purchase 400,000 shares of common stock. The option vests in annual installments based on the issuer's satisfaction of certain performance criteria for each of the fiscal years ending January 31, 2016 (10%), 2017 (20%), 2018 (30%) and 2019 (40%). The performance criteria for 2019 were met, resulting in the vesting of the option as to 160,000 shares.
- 5. The option is immediately exercisable

/s/ Jon Kessler

03/28/2019

\*\* 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.