FORM 4

obligations may continue. See Instruction 1(b).

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* Sacks Ian														heck a	elationship of Reporting F ck all applicable) Director Officer (give title below)		g Per	son(s) to Iss			
(Last)	ast) (First) (Middle) /O HEALTHEQUITY, INC.												\dashv						(specify		
15 W. SO	CENIC POI	NTE DR., STE.	100		4. 1	f Ame	endmer	nt, Date	e of O	 riginal	Filed	(Month/D	ay/Ye	ar)			ual or	Joint/Group	Filin	g (Check Ap	oplicable
(Street)	,													Lir	Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																		
		Tab	le I - Nor	ı-Deri	vative	e Se	curiti	ies A	cqui	ired,	Disp	osed (of, oı	r Bei	neficia	lly O	wnec	t			
Date					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Insti		tr. 5)			4 and Secu Bene Own		ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								-	Code	v			(A) or (D)	Price	Ti	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock			12/2	9/201	/2016			G		33,41	33,417 D		\$0		144,898(1)		D			
		Т	able II - I									sed of onverti				y Ow	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme	d Date,	4. Transa Code (8)	action	5. Number		6. Date Exercisa Expiration Date (Month/Day/Yea		rcisal Date	ble and 7. T of S		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Deriv Secu	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e rcisable		piration te	Title		Amount or Number of Shares						
Stock Option (right to buy)	\$21.27									(2)	02	/01/2026	Comi		15,000			15,000)	D	
Stock Option (right to buy)	\$14									(2)	07	/30/2024	Comi		15,000			15,000)	D	
Stock Option (right to	\$25.39									(2)	03	/26/2025	Comi		15,000			15,000)	D	

Explanation of Responses:

- 1. Includes 4,898 shares underlying restricted stock units previously reported in Table II.
- 2. These options are immediately exercisable.

Remarks:

buy)

The Power of Attorney given by Mr. Sacks 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. Sacks with respect to HealthEquity, Inc. and is hereby incorporated by reference.

/s/ Delano W. Ladd, attorney-

04/11/2017

in-fact

** 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.