FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | | |
|------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average bure | den | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

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

| 1. Name and Address of Reporting Person* Bloomberg Edward | | | | | | 2. Issuer Name and Ticker or Trading Symbol HEALTHEQUITY, INC. [HQY] | | | | | | | | | (Ch | eck all app Direc | icable) | ng Per | son(s) to Iss 10% O Other (s | wner | |
|--|--|--|--|--|--|--|-----|-----|-----|---|--|------------------|---------------|---|---|--|--|--|------------------------------------|---|--|
| (Last) (First) (Middle) C/O HEALTHEQUITY, INC. 15 W. SCENIC POINTE DR., STE. 100 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/14/2020 | | | | | | | | | | X Officer (give title Officer (specify below) Chief Operating Officer | | | | | |
| (Street) DRAPER UT 84020 (City) (State) (Zip) | | | | | - | If Amendment, Date of Original Filed (Month/Day/Year) tive Securities Acquired, Disposed of, or Benefit | | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | action | tion 2A. Deemed Execution Date, | | | е, | 3. 4. Securiting Disposed Code (Instr. 5) | | | ities Acc | uired | (A) or | 5. Amo Securi Benefi | unt of ies | Forn (D) c | n: Direct or Indirect | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | | | v | (D) | | Price | Transa (Instr. | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | | |
| Common | Common Stock 08/14/2020 F 776 D \$57.71 27,520 D | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | rivative Conversion Date Execution Date, Transaction or Exercise (Month/Day/Year) if any Code (Ins | | | | on of Expiration Date (Month/Day/Year) of Se Unde Securities | | | | | | 7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficial Owned Following Reported Transacti (Instr. 4) | e s lly | 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 | | xpiration ate | Title | 0 N | Amount or Number of Shares | | | | | | |
| Stock Option (right to buy) | \$82.39 | | | | | | | | | (1) | 08 | 8/13/2028 | Comm Stock | | 25,667 | | 25,66 | 7 | D | | |
| Stock Option (right to buy) | \$73.61 | | | | | | | | | (2) | 03 | 3/26/2029 | Comm | | 22,367 | | 22,36 | 7 | D | | |

Explanation of Responses:

- 1. The option is exercisable as to 12,834 shares. The option becomes exercisable as to 6,417 shares on August 13, 2021. The option becomes exercisable as to the remaining 6,416 shares on August 13, 2022.
- 2. The option is exercisable as to 5,592 shares. The option vests in two equal installments of 5,592 shares on March 26, 2021, and 2022. The option becomes exercisable as to the remaining 5,591 shares on March 26, 2023.

/s/ Edward Bloomberg

08/18/2020

** 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.