FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMB Number:	3235-0287									
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hours ner resnonse.	0.5									

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

								,				' '										
Name and Address of Reporting Person* Corvino Frank						2. Issuer Name and Ticker or Trading Symbol HEALTHEQUITY, INC. [HQY]									(Ch	eck all appli X Directo			son(s) to Iss			
(Last)	(Fi	•	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/28/2021									Officer below)	(give title		Other (s below)	specify			
15 W. SCENIC POINTE DR., STE. 100						If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable						
(Street) DRAPEI	R U	Γ	84020										Line) X Form filed by One Reporting Person Form filed by More than One Reportin Person									
(City)	(Si	tate)	(Zip)																			
		Tabl	le I - No	n-Deriv	ative	Sec	curitie	es A	cqui	ired,	Dis	posed o	of, or E	ene	ficial	ly Owne	d					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Date,			•,	3. Transaction Code (Instr. 8) 4. Securiti Disposed 5)						Benefic	ies Fe cially (D Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									G	Code	v	Amount	(A) (D)	or	Price	Transac (Instr. 3	ction(s)			(IIISU. 4)		
Common Stock 06/28/2						2021				S		1,133	.133 D \$		\$82.2	3 1,	1,133		D			
		Т	able II -									osed of onverti				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	n Date,	4. Transa Code (8)		on of I			Date Exe Diration Donth/Day	Date	ble and	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exe	e ercisabl		xpiration ate	Title	or Nu of	ımber							
Stock Option (right to buy)	\$21.27									(1)	0:	2/01/2026	Commo Stock	6	,482		6,482	2	D			
Stock Option (right to	\$14									(1)	0	7/30/2024	Commo Stock	¹ 3	,608		3,608	3	D			

Explanation of Responses:

1. The option is immediately exercisable.

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, attorney-in-06/29/2021 <u>fact</u>

** 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.