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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person* Sacks Ian						2. Issuer Name and Ticker or Trading Symbol HEALTHEQUITY, INC. [HQY]										5. Relationship of Reporting (Check all applicable) X Director			g Person(s) to Issuer 10% Owner	
(Last) (First) (Middle) C/O HEALTHEQUITY, INC.						3. Date of Earliest Transaction (Month/Day/Year) 02/01/2022										Officer below)	(give title		Other (below)	specify
15 W. SCENIC POINTE DR., STE. 100						f Ame	ndmen	t, Date	of O	Original I	Filed	(Month/D		6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) DRAPER UT 84020															X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																				
		Tab	le I - Noi	n-Deriv	ative	Sec	curiti	es A	cqu	ired,	Disp	osed o	of, o	r Ber	eficia	lly Owne	d			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					- 1		2A. Deemed Execution Date, if any (Month/Day/Year		e,	Code (Instr.		4. Securities Acquired (ADisposed Of (D) (Instr. 35)		d (A) or r. 3, 4 an	Benefici	es ially Following	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	Transac (Instr. 3	tion(s)			(111511.4)
Common Stock 02/01/					L/2022	/2022				A		727(1)		A	\$0	146	146,773		D	
Common Stock 02/01/						′2022				A		1,073(2)		A	\$0	147	147,846		D	
		Т										sed of onverti				y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	ed Date,	4. Transactior Code (Instr 8)		5. Number of		6. D Exp	6. Date Exercise Expiration Date (Month/Day/Year		able and 7. of r) Ui		7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.		Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e ercisable		opiration	Title		Amount or Number of Shares					
Stock Option (right to buy)	\$21.27									(3)	02	2/01/2026	Com		15,000		15,000	0	D	
Stock Option (right to buy)	\$14									(3)	07	7/30/2024	Com		15,000		15,000)	D	
Stock Option (right to buy)	\$25.39									(3)	03	3/26/2025	Com		15,000		15,000)	D	
Stock Option (right to	\$66.06									(3)	02	2/01/2030	Com		8,024		8,024		D	

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of the issuer's common stock. The restricted stock units vest in full on the date of the issuer's annual stockholder meeting held in the current fiscal year. Vested shares will be delivered to the reporting person upon vesting.
- 2. Each restricted stock unit represents a contingent right to receive one share of the issuer's common stock. The restricted stock units vested as to 269 shares on February 1, 2022. The remaining restricted stock units vest as to 268 shares on each of May 1, August 1, and November 1, of 2022. Vested shares will be delivered to the reporting person upon vesting.
- 3. The option is 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, attorneyin-fact

02/02/2022

** 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.