FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

/ashington,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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).

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*  Corvino Frank  (Last) (First) (Middle)  C/O HEALTHEQUITY, INC.  15 W. SCENIC POINTE DR., STE. 100						2. Issuer Name and Ticker or Trading Symbol HEALTHEQUITY, INC. [ HQY ]  3. Date of Earliest Transaction (Month/Day/Year) 02/01/2022									(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner Officer (give title below)  Other (specify below)				
(Street)  DRAPEI  (City)		tate)	34020 (Zip)	n-Deriv		4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check A Line)  X Form filed by One Reporting Person  Ative Securities Acquired, Disposed of, or Beneficially Owned									orting Perso	n				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Date, if any (Month/Day/Year)			cution Date, ly		Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Beneficia Owned F	es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
							/2022			v	Amount	(D)		Price	(Instr. 3	nsaction(s) tr. 3 and 4)			(Instr. 4)	
Common	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code (I 8)					6. Date Exercis Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dai Exc	te ercisable		opiration	Title	or Nu of	mber ares					
Stock Option (right to buy)	\$21.27									(2)	02	2/01/2026	Commor Stock	6,	482		6,482		D	
Stock Option (right to buy)	\$14									(2)	07	7/30/2024	Commor Stock	3,	608		3,608	3	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. 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, attorneyin-fact

\*\* Signature of Reporting Person

02/02/2022

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.