FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20049	

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1(c). S	ee Instruction 1	0.																	
Name and Address of Reporting Person* Lucania James M				2. Issuer Name and Ticker or Trading Symbol HEALTHEQUITY, INC. [HQY]								(Ch	eck all app Direc	ctor		10% Ov	vner		
(Last) (First) (Middle) C/O HEALTHEQUITY, INC. 15 W. SCENIC POINTE DR., STE. 100				3. Date of Earliest Transaction (Month/Day/Year) 09/10/2024									Officer (give title below) Other (specify below) EVP & CFO						
(Street) DRAPER UT 84020 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	, Dis	posed of	, or l	Ben	eficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution		ution E	Date,	Code (In					(A) or 3, 4 and	Benefi Owned	ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) (D)	or	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 09/10/2					2024			F		6,925	I)	\$76.2	2 7	79,915		D		
	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	Conversion Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Price of Derivative		4. Transaction Code (Instr. 8)		5. Nu of Deriv Secur Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed	6. Date Expirat (Month)	ion Da		Amount of Securities Underlying Derivative Security (Ins 3 and 4)		nstr.	8. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

/s/ James M. Lucania

09/11/2024

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).