Edgar Filing: HEALTHEQUITY INC - Form 4

HEALTHEQUIT	ΓY INC										
Form 4 June 26, 2015											
FORM 4	L								PPROVAL		
	UNITED	STATES		RITIES A			E COMMISSION	OMB Number:	3235-0	287	
Check this bo if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction	STATEM Filed pur Section 17(suant to S a) of the I	Section Public U	SECUI	Estimated burden hou response	Estimated average burden hours per response 0.5					
1(b).	11				1	2					
(Print or Type Respo	onses)										
1. Name and Address of Reporting Person <u>*</u> Corvino Frank			Symbol	er Name an THEQUI		-	5. Relationship of Reporting Person(s) to Issuer				
(Last)	Middle)		-	-		(Check all applicable)					
C/O HEALTHE SCENIC POINT	3. Date of Earliest Transaction (Month/Day/Year) 06/24/2015				X_ Director 10% Owner Officer (give title Other (specify below) below)						
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 					
DRAPER, UT 8	4020						Person	More than One R	eporting		
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Securities A	Acquired, Disposed of	of, or Beneficia	lly Owned		
	ansaction Date nth/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4 Amount	(A) or of (D)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature o Indirect Beneficial Ownership (Instr. 4)		
Reminder: Report o	n a separate line	for each cla	ass of sec	urities bene	ficially ow	ned directly	or indirectly.				
					inforn requii	nation con red to resp ays a curre	spond to the collect tained in this form ond unless the for ntly valid OMB co	are not m	SEC 1474 (9-02)		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

Edgar Filing: HEALTHEQUITY INC - Form 4

(Instr. 3)	Price of Derivative Security	(Month/Day/Year)		(Instr.	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 25.39	03/26/2015		А		15,000		<u>(1)</u>	03/26/2025	Common Stock	15,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Corvino Frank C/O HEALTHEQUITY, INC. 15 W. SCENIC POINTE DR., STE. 100 DRAPER, UT 84020	х						
Signatures							
/s/ Frode Jensen, 06/ attorney-in-fact	26/2015						
**Signature of Reporting Person	Date						

Explanation of Responses:

- * 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).

The option became exercisable as to 7,500 shares upon the reporting person's reelection to the issuer's board of directors at the issuer's
 (1) 2015 Annual Meeting of Stockholders held on June 24, 2015. The remaining 7,500 shares will become exercisable on January 31, 2016; provided, that the reporting person continues to serve as a director of the issuer through such date.

Remarks:

Exhibit List: Exhibit 24 - Power of Attorney

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

(