Edgar Filing: HEALTHEQUITY INC - Form 4

HEALTHEQ	UITY INC						
Form 4							
June 27, 201							
FORM	4				OMB A	PPROVAL	
CURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						3235-0287	
	Check this box						
if no longer subject to Section 16 SECURITIES					Expires: 2005 Estimated average		
Section 1 Form 4 or			burden hou	irs per			
Form 5		rsuant to Section	16(a) of the Securities Excha	nge Act of 1934	response	0.5	
obligation	ns Section 17(Utility Holding Company Act	-	1		
may cont <i>See</i> Instru	inue.		Investment Company Act of 1				
1(b).							
(Print or Type F	Responses)						
	ddress of Reporting	Person <u>*</u> 2. Iss	uer Name and Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer			
Dilsaver Eve	elyn S	Symbo					
			LTHEQUITY INC [HQY]	(Check all applicable)			
(Last)	(First) (of Earliest Transaction				
			/Day/Year)	X_ Director Officer (give t		b Owner er (specify	
	THEQUITY, INC DINTE DR., STE		/2016	below)	below)	er (speeny	
(Street)			nendment, Date Original	6. Individual or Joint/Group Filing(Check			
		Filed(M	Ionth/Day/Year)	Applicable Line)			
	IT 84020			_X_ Form filed by O Form filed by M			
DRAPER, U	1 84020			Person			
(City)	(State)	(Zip) Ta	ble I - Non-Derivative Securities A	cquired, Disposed of,	or Beneficial	lly Owned	
1.Title of	2. Transaction Date	2A. Deemed	3. 4. Securities		Ownership	7. Nature of	
-	(Month/Day/Year)	Execution Date, if	· · · ·		orm: Direct	Indirect	
(Instr. 3)		any (Month/Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)	Beneficially (E Owned (I)	0) or Indirect	Ownership	
		()			nstr. 4)	(Instr. 4)	
			(A)	Reported			
			or	Transaction(s) (Instr. 3 and 4)			
			Code V Amount (D) Price				
Reminder: Rep	ort on a separate line	e for each class of se	curities beneficially owned directly	or indirectly.			
				spond to the collect		EC 1474	
				ained in this form a		(9-02)	
				ond unless the form ntly valid OMB cont			
			number.	,			

 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

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(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)	\$ 21.27	06/23/2016		А	15,000	(1)	02/01/2026	Common Stock	15,000
Stock Option (right to buy)	\$ 25.39					(2)	03/26/2025	Common Stock	15,000
Stock Option (right to buy)	\$ 14					(2)	07/30/2024	Common Stock	7,500
Stock Option (right to buy)	\$ 14					<u>(3)</u>	07/30/2024	Common Stock	25,000

Reporting Owners

Reporting Owner Name / Address		Relationships					
				Officer	Other		
Dilsaver Evelyn S C/O HEALTHEQUITY, INC. 15 W. SCENIC POINTE DR., STE DRAPER, UT 84020	E. 100	Х					
Signatures							
/s/ Evelyn S. 06/23/ Dilsaver 06/23/	/2016						

**Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

** 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) 2016 Annual Meeting of Stockholders held on June 23, 2016. The remaining 7,500 shares will become exercisable on January 31, 2017; provided, that the reporting person continues to serve as a director of the issuer through such date.

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- (2) The option is immediately exercisable.
- (3) The option became exercisable as to 6,250 shares on June 30, 2015. The option becomes exercisable as to the remaining 18,750 shares in three equal installments of 6,250 shares on June 30, 2016, 2017 and 2018.

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.