Edgar Filing: Dreier Ashley - Form 4

Dreier Ashley

Form 4	у									
May 02, 201	8									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287	
Check thi if no long	er.		~		~			Expires:	January 31, 2005	
subject to Section 1 Form 4 or	6. r		F CHANGES IN BENEFICIAL OWI SECURITIES					Estimated a burden hour response	average urs per	
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type F	Responses)									
1. Name and A Dreier Ashle	Symbol					5. Relationship of Reporting Person(s) to Issuer				
HEALTHEQUITY INC [HQY]							(Check	c all applicable))	
(Last) (First) (Middle) 3. Date of Earli (Month/Day/Ye				insaction			Director 10% Owner			
C/O HEALTHEQUITY, INC., 15 W. 04/30/2018 SCENIC POINTE DR., STE. 100						XOfficer (give titleOther (specify below) below) Executive, VP, CTO and CIO				
	endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
DRAPER, U						Form filed by More than One Reporting Person				
(City)	(State) (Zip)	Table	I - Non-D	erivative S	Securi	ties Acqu	iired, Disposed of,	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	any	ution Date, if	Date, if Transaction(A) or Disposed Code (Instr. 3, 4 and 5			of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership	
G			Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	04/30/2018		M <u>(1)</u>	16,250	А	\$ 24.36	49,439	D		
Common Stock	04/30/2018		S <u>(1)</u>	16,250	D	\$ 67	33,189	D		

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

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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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. Number of TransactionDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 14						(2)	07/30/2024	Common Stock	6,000
Stock Option (right to buy)	\$ 1.5						(2)	05/09/2023	Common Stock	16,750
Stock Option (right to buy)	\$ 24.36	04/30/2018		M <u>(1)</u>		16,250	(3)	03/23/2026	Common Stock	16,250

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Dreier Ashley C/O HEALTHEQUITY, INC. 15 W. SCENIC POINTE DR., STE. 100 DRAPER, UT 84020			Executive, VP, CTO and CIO					

Signatures

/s/ Ashley 05/01/2018 Dreier Date

**Signature of Reporting Person

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 exercises and subsequent sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the (1) reporting person on December 12, 2017
- (2) The option is immediately exercisable.

8 Ι 5 (3) The option is immediately exercisable as to 16,250 shares. The option becomes exercisable as to the remaining 32,500 shares in two equal installments on March 23, 2019 and 2020.

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.