

# QUINSTREET, INC Reported by COLLINS MARTIN J

### FORM 4

(Statement of Changes in Beneficial Ownership)

## Filed 02/14/17 for the Period Ending 02/10/17

Address 950 TOWER LANE, 6TH FLOOR

FOSTER CITY, CA 94404

Telephone 650-578-7700

CIK 0001117297

Symbol QNST

SIC Code 7389 - Business Services, Not Elsewhere Classified

Industry Advertising & Marketing

Sector Consumer Cyclicals

Fiscal Year 06/30



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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *													5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Collins Martin J							QUINSTREET, INC [ QNST ]											
(Last) (First) (Middle)					3. 1	3. Date of Earliest Transaction (MM/DD/YYYY)								Director 10% Owner				
														Officer (give title below) Other (specify below)  SVP & General Counsel				
950 TOWER LANE, 6TH FLOOR							2/10/2017								ai Couns	sei		
(Street)						4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)					
FOSTER CITY, CA 94404														_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)													Tom med by More than one reporting reson					
			Table						•	, <u> </u>	•			neficially Owne			1	
1.Title of Security (Instr. 3)  2. Trans. E						Deemed ution if any	3. Trans. Co (Instr. 8)	de	e 4. Securities Acquor Disposed of (D (Instr. 3, 4 and 5)			5. Amount of Sec Following Report (Instr. 3 and 4)		rities Beneficially Owned d Transaction(s)		Ownership Form:	7. Nature of Indirect Beneficial Ownership	
								Code	V	Amoun	(A) or (D)	Pric	e					(Instr. 4)
Common Stock 2/10/201'					017	F (1) 1369 D \$3.28 89237					D							
Common Stock 2/10/201'				017			F (1)		548	D	\$3.28	3	8	88689				
	Tabl	le II - Der	ivative	Secur	ities l	Bene	ficially	Owned (	e.g. ,	, puts,	calls, w	arran	ıts, (	options, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative		Execution			Code	ode 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date			ities I	Jnderlying Derivative Security Security			Ownership Form of Derivative Security:	Beneficial
	Security					V	(A)	(D)	Date Exer	cisable 1	Expiration Date		Amo Shar	ount or Number of res	int or Number of Rep		Direct (D) or Indirect on(s) (I) (Instr. 4)	

#### **Explanation of Responses:**

- ( Exempt transaction pursuant to Section 16b-3 for payment of exercise price or tax liability by delivering or withholding securities incident to the receipt,
- 1) exercise or vesting of a security issued in accordance with Rule 16b-3. All of the shares reported as disposed of in this Form 4 were relinquished to the Issuer by the Reporting Person and cancelled by the Issuer in exchange for the Issuer's agreement to pay federal and state tax withholding obligations of the Reporting Person resulting from the vesting of RSUs. The Reporting Person did not sell or otherwise dispose of any of the shares in this Form 4 for any reason other than to cover required taxes.

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Collins Martin J								
950 TOWER LANE, 6TH FLOOR			SVP & General Counsel					
FOSTER CITY, CA 94404								

#### **Signatures**

By: Gregory Wong For: Martin J. Collins

\*\*Signature of Reporting Person

Date

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

- \* 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 control number.