Edgar Filing: QUINSTREET, INC - Form 4

QUINSTRE Form 4	EET, INC											
February 13	3, 2015											
FORM	ЛΔ										APPROVA	'L
	UNITED	STATES				ND EX D.C. 20		NGE	COMMISSIO	N OMB Number:	3235-	0287
Check t if no lor subject Section Form 4	nger STATEN 16.	MENT OF	CHAN			BENEF ITIES	'ICIAI	LOV	WNERSHIP OI	Expires: Estimated burden ho response.	average urs per	7y 31, 2005 0.5
Form 5 obligati may con <i>See</i> Inst 1(b). (Print or Type	ons Section 17(ruction	(a) of the P	ublic U	Jtility H	Iolo		mpany	Act	nge Act of 1934, of 1935 or Secti 940			
	Address of Reporting REGORY P	:	Symbol			Ticker of		g	5. Relationship Issuer			
(Last)	(First) (Middle)	3. Date of Earliest Transaction						(Check all applicable)			
950 TOWE	ER LANE, 6TH F	(Day/Yea					XDirector Officer (give below)		% Owner her (specify	
	(Street)	4	4. If Am	endment,	, Da	te Origina	al		6. Individual or	Joint/Group Fili	ing(Check	
FOSTER C	CITY, CA 94404]	Filed(Mo	onth/Day/Y	Year)			Applicable Line) _X_ Form filed by Form filed by Person	y One Reporting F More than One R		
(City)	(State)	(Zip)	Tab	ole I - No	n-D) erivative	Securi	ties A	cquired, Disposed	of. or Beneficia	ally Owned	1
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution I any (Month/Day	d Date, if	3. Transac Code (Instr. 8	ctior 3)	4. Securit Acquired Disposed (Instr. 3,	ties (A) or of (D) 4 and 5) (A) or)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature Indirect	of 1
						Amount	. ,	Price				
Reminder: Re	port on a separate line	e for each clas	ss of sec	urities be	enef	Perso inforr requi	ons when the mation red to red	o res cont respo	or indirectly. spond to the colle ained in this form and unless the fo ntly valid OMB co	n are not orm	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	6. Date Exercisable and	7. Title and Amount
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securitie
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired		

number.

	Derivative Security			D (I (I	A) or Disposed of D) Instr. 3, 4, nd 5)				
			Code	V	(A) (D) Date Exercisable	Expiration Date	Title	Amou or Numb of Shares
Non-Qualified Stock Option (right to buy)	\$ 5.9	02/11/2015	А	e	5,449	<u>(1)</u>	02/10/2022	Common Stock	6,44
Reporting	g Owne	rs							

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
SANDS GREGORY P 950 TOWER LANE, 6TH FLOOR FOSTER CITY, CA 94404	Х			
Signatures				
By: Martin J. Collins For: Gregory Sands		02/13/2015	5	

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).

Date

(1) The shares of common stock subject to this option are fully vested and exercisable.

Mr. Sands elected to receive options in lieu of cash compensation as consideration for his service as a member of QuinStreet, Inc.'s (the "Company") board of directors and a member of the Company's Nominating and Corporate Governance and Compensation Committees

(2) for the quarter ended December 31, 2014. The number of options granted was determined by dividing the cash compensation otherwise payable with respect to the quarter by the Black-Scholes value of a single option calculated as of the date of grant. The election is available to independent directors, is made annually and applies to the entire fiscal year.

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.