FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | D.C. 20549 |
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| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See | STATEMENT OF CHANGES |
|---|------------------------------------|
| Instruction 1(b). | Filed pursuant to Section 16(a) of |

S IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Bhanap Nina | | | | | 2. Issuer Name and Ticker or Trading Symbol QUINSTREET, INC [QNST] | | | | | | | | | | heck all D | nship of Reportir applicable) Director Officer (give title | g Person(s) to Issuer 10% Owner Other (specify | |
|---|---|-----------------------|---|--|--|---|---|------------------|--|-----------------------------------|-------------------------|---|--------------------------------|--------|--|---|---|--|
| (Last) | ` | rst) (, 6TH FLOOR | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 02/10/2015 | | | | | | | | | | elow) | below nology Office | <i>I</i>) | |
| (Street) FOSTER (City) | CITY CA | | 94404 (Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/ | | | | | | |) | 6. Lin | ie) <mark>X</mark> F F | al or Joint/Grou Form filed by On Form filed by Mo Person | e Reporting Per | son |
| | | Tabl | le I - Nor | า-Deri\ | /ative | Sec | curitie | s Acc | quired, | Disp | osed o | f, or I | Bene | ficia | lly Ov | vned | | |
| 1. Title of Security (Instr. 3) | | | | 2. Transaction Date (Month/Day/Year) | | ar) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (| Transaction Di Code (Instr. 5) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | d Se Be Ow | Amount of curities neficially vned Following ported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | (A (D | () or () | Price | Tra | ansaction(s) str. 3 and 4) | | (|
| Common | Stock 02/10/2015 | | | | | 015 | | F ⁽¹⁾ | | 1,027 | 7 | D | \$ 6 . | 1 | 268,457 | D | | |
| Common | Stock | | | 02/1 | 0/2015 | 5 | | | F ⁽¹⁾ | | 2,053 D \$6.1 266,404 D | | | | | D | | |
| | | Та | able II - D | | | | | | | | sed of, onvertib | | | | Own | ed | | |
| Security or Ex (Instr. 3) Price Deriv | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deeme Execution if any (Month/Da | Date, | 4. Transaction Code (Instr. 8) | | n of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | 8. Price Derivati Security (Instr. 5) | ve derivative Securities | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisal | ate E xercisable D | | Title | Amo or Num of Shar | ber | | | | |

Explanation of Responses:

1. Exempt transaction pursuant to Section 16b-3 for payment of exercise price or tax liability by delivering or withholding securities incident to the receipt, 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.

By: Martin J. Collins For: Nina 02/12/2015 **Bhanap**

** Signature of Reporting Person

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 Number.