FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C	20549	
wasiiiiigitiii,	D.C.	20049	

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours nor resnance.	0.5								

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

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*     Simons James R.						2. Issuer Name <b>and</b> Ticker or Trading Symbol QUINSTREET, INC [ QNST ]								(Che	elationship eck all app X Direc	licable)	ng Pe	rson(s) to Is		
(Last)	(1	First)	A) (N	/liddle)			3. Date of Earliest Transaction (Month/Day/Year) 10/27/2023									Office below	er (give title v)		Other (: below)	specify
950 TOWER LANE, 6TH FLOOR					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)															X Form filed by One Reporting Person					
FOSTER	CITY	CA	94	4404												Form Perso		re tha	n One Rep	orting
(City) (State) (Zip)						Rul	Rule 10b5-1(c) Transaction Indication													
							Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
			Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day			Execution Date,				es Acquired (A) or Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported		Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership						
									Code	v	Amount	(A) (D)	or	Price	Transa	ction(s) 3 and 4)			(Instr. 4)	
Common Stock 10/27/2				1023				A		14,471(1)	I	A	\$0.0	58	58,886		D			
Common	Stock														1 1 44 841 1 1 1			by Trust <sup>(2)</sup>		
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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any		ion Date,		ansaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		estr.	3. Price of Derivative Security Instr. 5)	erivative derivative curity Securities	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code V (A) (D) Date Exercisa		able	Expiration Date	Amoul or Number of Title Shares		ber								

## **Explanation of Responses:**

- 1. Represents shares of common stock that are issuable pursuant to a Restricted Stock Unit (RSU) award. The vesting commencement date of the RSU award is October 27, 2023 and it vests daily over one year.
- 2. Represents securities held directly by the James Rexroad Simons Trust, which the reporting person is the trustee. The reporting person disclaims beneficial ownership of the reported securities, except to the extent of any pecuniary interest therein. This report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

Gregory Wong For James

Simons

\*\* Signature of Reporting Person Date

10/31/2023

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

- $^{\star}$  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.