FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person SANDS GREGORY P					QUINSTREET, INC [QNST]									(Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 950 TOWER LANE, 6TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 10/26/2015								Officer	Officer (give title below)		Other (below)	specify	
(Street) FOSTER CITY CA 94404					4. 1	Line)									X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	y) (State) (Zip)					Person													
		Tab	le I - No	n-Deri	ivativ	e Se	curities	s Ac	quired	, Dis	sposed o	f, or Be	neficia	lly Owned	I				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					5. Amoun Securities Beneficia Owned Fo	s illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)		
Common Stock			10/2	10/26/2015				A		10,000	(1) A	\$0.0	30,0	30,000		D			
Common Stock													6,7	6,785		I :	by Managed Account ⁽²⁾		
Common Stock														14,9	912		I	by Son ⁽³⁾	
Common Stock													214,	761		I	by Trust ⁽⁴⁾		
		-	Table II -								osed of, converti			/ Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transa Code (8)		5. Number		6. Date E Expiratio (Month/D	n Dat		7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficie Owned Followin Reporter Transact (Instr. 4)	re es ally ig d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Non- Qualified Stock Option (right to	\$5.8	10/26/2015			A		25,000		(5)		10/25/2022	Common Stock	25,000	\$0.0	25,0	00	D		

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 November 10, 2015 and it vests daily over one
- 2. Shares held by a charitable remainder unitrust of which the reporting person is the trustee. The reporting person disclaims beneficial ownership in these shares except as to the reporting person's pecuniary
- 3. Shares held by children of the reporting person. The reporting person disclaims beneficial ownership in these shares.
- 4. Shares held by trust of which reporting person is a trustee. The reporting person disclaims beneficial ownership in these shares except as to the reporting person's pecuniary interest therein.
- 5. Represents shares of common stock subject to a stock option award. The vesting commencement date of the stock option award is October 26, 2015 and it vests monthly in equal installments over a period of one year. The initial vest date is November 26, 2015 and the final vest date is October 26, 2016.

By: Gregory Wong For: 10/28/2015 **Gregory Sands**

** 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 Number.