FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-	
	Estimated average burden		
	hours per response:		

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OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

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

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*  POSEY BRUCE K						2. Issuer Name <b>and</b> Ticker or Trading Symbol QUALYS, INC. [ QLYS ]									Check	tionship of Reporti all applicable) Director Officer (give title		10% C			
(Last) (First) (Middle) C/O QUALYS, INC. 919 E. HILLSDALE BLVD.							3. Date of Earliest Transaction (Month/Day/Year) 08/01/2018									X	belov			elow)	
(Street) FOSTER CITY CA 94404  (City) (State) (Zip)						4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
			Tabl	e I - Noi	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, o	r Ben	efici	ally (	Owne	ed			
Date					Execution Day/Year) if any		ecution Date,		3. Transaction Code (Instr. 8)  4. Secur Dispose 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			4 and S		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
										Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				
Common	Stock				08/01	08/01/2018						985(1)	) D S		\$85	35,54		5,548	D		
	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)	2. Conversic or Exercis Price of Derivative Security	on C se (	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,		ransaction Code (Instr.		of		6. Date Exercis Expiration Date (Month/Day/Ye		7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)			Deriv	Price of ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownersh Form: Direct (D or Indirect (I) (Instr.	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	(A)	(A) (D)			Expiration Date	Title	or Nur of	ount mber ares	er					

## **Explanation of Responses:**

1. The reported shares were withheld to cover the Reporting Person's tax liability in connection with the vesting of restricted stock units.

**STATEMENT** 

## Remarks:

/s/ Bruce Posey

08/03/2018

\*\* 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.