SEC Form 4	
------------	--

 \square

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
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

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

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burde	en								
hours per response:	0.5								

1. Name and Address of Reporting Person* Thakar Sumedh S (Last) (First) (Middle) C/O QUALYS, INC. 1600 BRIDGE PARKWAY			2. Issuer Name and Ticker or Trading Symbol <u>QUALYS, INC.</u> [QLYS] 3. Date of Earliest Transaction (Month/Day/Year) 07/10/2017		ationship of Reporting Pr k all applicable) Director Officer (give title below) Chief Produc	10% Owner Other (specify below)
(Street) REDWOOD CITY (City)	CA (State)	94065 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indi Line) X	vidual or Joint/Group Fili Form filed by One Re Form filed by More th Person	eporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	07/10/2017		M ⁽¹⁾		1,800	A	\$8.4	138,631	D	
Common Stock	07/10/2017		S ⁽¹⁾		1,800	D	\$40.6739(2)	136,831	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transa Code (of	umber vative	6. Date Exerce Expiration Da (Month/Day/)	ate	7. Title and Amount of Securities		8. Price of Derivative Security	9. Number of derivative Securities	10. Ownership Form:	11. Nature of Indirect Beneficial
(Instr. 3)	Price of Derivative Security		(Month/Day/Year)			Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(monuluzay) real)		Underlying Derivative Security (Instr. 3 and 4)		(Instr. 5)	Beneficially Owned	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to buy)	\$8.4	07/10/2017		M ⁽¹⁾			1,800	(3)	04/29/2022	Common Stock	1,800	\$0.00	12,915	D	

Explanation of Responses:

1. The sale transaction reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on May 27, 2016.

2. The sale price represents the weighted average price of the shares sold ranging from \$40.50 to \$40.90 per share. Upon request by the Commission staff, the Issuer or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price within the range set forth in this Form 4.

3. The option is subject to an early exercise provision and was immediately exercisable. One forty-eighth of the shares subject to the option vested on May 30, 2012 and one forty-eighth of the shares subject to the option vested monthly thereafter.

Remarks:

<u>/s/ Bruce Posey by power of</u> attorney for Sumedh S. Thakar

07/12/2017

** 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.