FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burd	en							
l	hours per response:	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

1. Name ar Thakar		2. Issuer Name and Ticker or Trading Symbol QUALYS, INC. [QLYS]									all appli Directo	ship of Reporting applicable) irector ifficer (give title		son(s) to Iss 10% Ov Other (s	vner					
(Last) C/O QUA 919 E. H		3. Date of Earliest Transaction (Month/Day/Year) 01/09/2019										below) below) Chief Product Officer								
(Street) FOSTER CITY CA 94404						4. If Amendment, Date of Original Filed (Month/Day/Year)									lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(5)		(Zip) 	Non-Deriv	vative	Sec	uriti	ies A	cauire	d. D	isposed o	of, or Bo	enefici	ally	Owner					
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a		(A) or	5. Ar Secu Bene Own		int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price			rted action(s) 3 and 4)			(Instr. 4)		
Common	Stock	01/09/2	019				M ⁽¹⁾		1,600	A	\$12.6	58	21	.5,885		D				
Common Stock 01/09/20						19			S ⁽¹⁾		2,316	D	\$77.97	′5 ⁽²⁾	213	3,569		D		
Common	mmon Stock 01/09/20					.9		S ⁽¹⁾		1,483	D	\$78.60	.6055 ⁽³⁾		212,086		D			
		T	able								sposed of, , converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed tion Date, n/Day/Year)	4. Transa Code (8)				6. Date Expira (Month	tion D		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amoun or Numbe of Shares	er						
Stock Option (right to	\$12.68	01/09/2019			M ⁽¹⁾			1,600	(4))	02/06/2023	Common Stock	1,600		\$0.00	19,011		D		

Explanation of Responses:

- $1. \ The sale transaction reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on May 30, 2017.$
- 2. The sale price represents the weighted average price of the shares sold ranging from \$77.39 to \$78.36 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 sale price represents the weighted average price of the shares sold ranging from \$78.52 to \$78.76 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.
- 4. The option is fully vested and immediately exercisable.

Remarks:

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

01/11/2019

** 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.