## Edgar Filing: Traynor John F.K. - Form 4

Traynor John	n F.K.												
Form 4													
May 15, 2012	2												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								-	OMB APPROVAL				
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287			
Check thi										Expires:	January 31,		
subject to	if no longer subject to STATEMENT OF CHANG				ES IN BENEFICIAL OWNERSHIP OF					Estimated a	2005		
Section 1		SECURITIES							burden hours per				
Form 4 or	r									response	•		
Form 5	<b>^</b>							-	ge Act of 1934,				
obligatior may conti	Section 170			•		•	· ·		f 1935 or Sectio	n			
<i>See</i> Instru 1(b).		30(h)	of the Inv	vestmer	nt C	Compan	y Act	: of 194	40				
(Print or Type R	Responses)												
Traynor John F.K. Symbol				ymbol Issuer					*	Relationship of Reporting Person(s) to uer			
				QUARE CORP /WA [BSQR] (Chec					ck all applicable)				
(Last)	(First) (N	Middle)	3. Date of	Earliest 7	Tra	nsaction			(		,		
(Month/Da			onth/Day/Year)					Director 10% Owner					
110 - 110TH 200	I AVENUE, NE,	SUITE	05/14/20	)12					_X_ Officer (give below) Vice Pr	e title Oth below) resident, Produ	er (specify cts		
	(Street)		4. If Ame	ndment. I	Date	e Original			6. Individual or Jo	oint/Group Filir	1g(Check		
· · · · · · · · · · · · · · · · · · ·			Amendment, Date Original d(Month/Day/Year)					Applicable Line)					
BELLEVUE	E, WA 98004			·					_X_ Form filed by 0 Form filed by M Person	1 0			
(City)	(State)	(Zip)	Table	e I - Non	-De	erivative S	Securi	ties Aco	quired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Date	e 2A. Dee	med	3.		4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution any	on Date, if		ction	n(A) or Di	ispose	d of	Securities	Form: Direct	Indirect		
(Instr. 3)		Code (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership			
		(INIOIIIII)	Day/ICal)	(insu. o	,	(111501. 5,	+ anu	5)	Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported	. ,			
							(A) or		Transaction(s)				
				Code	V	Amount		Price	(Instr. 3 and 4)				
Common Stock	05/14/2012			F		35 <u>(1)</u>	D	\$ 2.63	54,871	D			

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

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 control number.

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

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Addr	ess	Relationships							
	Director	10% Owner	Officer	Other					
Traynor John F.K. 110 - 110TH AVENUE, NH SUITE 200 BELLEVUE, WA 98004	2		Vice President, Products						
Signatures									
/s/ John F.K. Traynor	05/15/2012								
**Signature of Reporting Person	Date								

## **Explanation of Responses:**

\* 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).

(1) Represents shares that were withheld to pay the minimum tax liability for the restricted stock units that vested on May 14, 2012.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.