SEC Form 3

FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL
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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* Beharelle A. Patrick			2. Date of Event Re Statement (Month/ 06/30/2014	<u> </u>	3. Issuer Name and Ticker or Trading Symbol <u>TrueBlue, Inc.</u> [ TBI ]						
(Last)					4. Relationship of Reporting Person( (Check all applicable) Director		b) to Issuer	(M	5. If Amendment, Date of Original Filed (Month/Day/Year)		
1015 A STREET				X	Officer (give title below)	Other (spec below)	ify Ap	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person			
(Street) TACOMA	,					Pres&COO Outsourcin	ng Solutions		Form filed by More than One Reporting Person		
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)						nt of Securities Illy Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned           (e.g., puts, calls, warrants, options, convertible securities)											
, , , , , , , , , , , , , , , , , , ,			Expiration D	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Derivative Security (Instr. 4)		4. Conversion or Exercise	cise (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Price of Derivative Security	Indirect (I) (Instr. 5)		

## Explanation of Responses:

Remarks:

As of June 30, 2014, Mr. Beharelle held zero TrueBlue, Inc. securities. No securities are beneficially owned.

No securities are beneficially owned.

Todd N. Gilman, Attorney-in-fact 07/10/2014

\*\* 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 5 (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.