

TRUEBLUE, INC. Reported by MCKIBBIN GATES

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 08/01/13 for the Period Ending 07/30/13

Address 1015 A STREET

TACOMA, WA 98402

Telephone 253-383-9101

CIK 0000768899

Symbol TBI

SIC Code 7363 - Help Supply Services

Industry Business Services

Sector Services

Fiscal Year 12/31





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

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 Add	dress of Re	porting 1	Person *	2	. Iss	suer Nan	ne a	nd [Tick	ker or	r Tra	dir	ng Symb			nship of l applicab		Person(s	s) to Issuer
MCKIBBIN	GATES			T	ru	eBlue,	Inc	e. [TE	3I]									
(Last) (First) (Middle)				3	3. Date of Earliest Transaction (MM/DD/YYYY)									, – –	X Director				Owner
1015 A STRE	ET. P.O). BOX	2910					7/3	30/2	2013	3			below)	Officer	(give title	below)	Othe	r (specify
	(Street)					Amendr DD/YYYY		, Da	ate (Origi	nal F	ile	ed	6. Ind			nt/Group	Filing (C	heck
TACOMA, V	VA 9840	2												V F	form fi	led by One	Reporting P	ercon	
(City)	(State)	(Zip))														than One Re		on
		Table l	I - Non-l	Deriv	ati	ve Secu	ritie	s Ac	cqu	ired,	Dis	pos	sed of, o	r Benefi	cially	Owned			
1.Title of Security (Instr. 3)			2. Tra Date	ns.	Date, if	Cod	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Follo (Inst	(Instr. 3 and 4) Form: Direct (D)			Ownership Form: Direct (D)	Beneficial Ownership		
						any	Co	ode	V A	Amount	(A) or (D)	P	rice					or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				7/30/2	2013		N	1		2500	A	\$10	6.98		151	87		D	
Common Stock				7/30/2	2013		s	5	1	2500	D	\$20	6.42		126	87		D	
Common Stock															144	1 7		I	Ms. McKibbin's Retirement Account
Tal	ole II - De	rivative	Securiti	es Be	enef	icially (Own	ed ((e. g	z. , pı	uts, o	cal	ls, warr	ants, opt	ions,	convert	ible secu	rities)	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)		5. Number Derivative Securities Acquired (Disposed of	A) or of (D)	and E A) or f (D)		te Exercisable xpiration Date				-		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following	Form of Derivative	(Instr. 4)
				Code		5)		Dat			Expiration Date		Title	Amount or Number of Shares			Reported Transaction (s) (Instr. 4)	(I) (Instr. 4)	
Options (Right to Buy)	\$16.98	7/30/2013		М		250	0	1/3	3/200 (1)	1/	/3/201	.5	Common Stock	2500		\$0	2500	D	

Explanation of Responses:

(1) Options subject to this grant fully vested on the grant date.

Reporting Owners

Paperting Owner Name / Address	Relationships								
Reporting Owner Name / Addres	Director	10% Owner	Officer	Other					
MCKIBBIN GATES									
1015 A STREET	X								
P.O. BOX 2910	A								
TACOMA, WA 98402									

Todd N. Gilman, Attorney-in-fact

8/1/2013

** 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 control number.