

TRUEBLUE, INC. Reported by **SOODIK BONNIE W**

FORM 4/A

(Amended Statement of Changes in Beneficial Ownership)

Filed 04/09/15 for the Period Ending 02/09/15

Address	1015 A STREET
	TACOMA, WA 98402
Telephone	253-383-9101
CIK	0000768899
Symbol	ТВІ
SIC Code	7363 - Help Supply Services
Industry	Business Services
Sector	Services
Fiscal Year	12/31

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FORM 4	
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[] 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

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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 Address of Reporting Person *	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
SOODIK BONNIE W	TrueBlue, Inc. [TBI]	
(Last) (First) (Middle)	3. Date of Earliest Transaction (MM/DD/YYYY)	X Director 10% Owner
		Officer (give title below) Other (specify
1015 A STREET	2/9/2015	below)
(Street)	4. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line)
TACOMA, WA 98402 (City) (State) (Zip)	2/10/2015	X Form filed by One Reporting Person Form filed by More than One Reporting Person

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

1.Title of Security	2. Trans.	2A.	3. Trans. 4. Se		4. Securities			5. Amount of Securities Beneficially Owned	6.	7. Nature	
(Instr. 3)	Date	Deemed	Code Acqui		Acquired (A) or		or	Following Reported Transaction(s)	Ownership	of Indirect	
		Execution	(Instr. 8)	Instr. 8) Disposed of (D)		D)	(Instr. 3 and 4)	Form:	Beneficial		
		Date, if	(Instr. 3, 4 and 5)		d 5)		Direct (D)	Ownership			
		any				(A)			or Indirect	(Instr. 4)	
						or			(I) (Instr.		
			Code	v	Amount		Price		4)		
					2838						
Common Stock	2/9/2015		A		(1)	A	\$0.00	15769	D		

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

1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of		Deemed Execution Date, if	Code	8)	Acquired (A)	6. Date Exer and Expirati			Underlying Security	Derivative Security (Instr. 5)	of derivative Securities	Form of Derivative	11. Nature of Indirect Beneficial Ownership
	Derivative Security		any	Code	_	Disposed of (I (Instr. 3, 4 and (A)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Following	Direct (D) or Indirect (I) (Instr. 4)	(Instr. 4)
Deferred Stock Award	(2)	2/9/2015		A		2837 (1)	(3)	(3)	Common Stock	2837	\$0.00	15591	D	

Explanation of Responses:

- (1) This Form 4A amends the Form 4 filed on February 10, 2015 to reflect the fact that Ms. Soodik elected to defer 50% of her stock award granted on February 9, 2015, not the entire award as previously reported.
- (2) Each deferred stock award represents a right to receive one share of TrueBlue, Inc. common stock.
- (3) The deferred stock award is fully vested. Delivery of these shares to Ms. Soodik will be made ninety (90) days after her separation from the Board of Directors.

Reporting Owners

Banarting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10%	Owner	Officer	Other		
SOODIK BONNIE W							
1015 A STREET	X						
TACOMA, WA 98402							

Signatures

Todd N. Gilman, Attorney-in-fact

** Signature of Reporting Person

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.