QCR HOLDINGS INC

Check this box if

no longer subject

to Section 16.

5 obligations

may continue.

Form 4 or Form

Form 5

February 11, 2014

OMB APPROVAL FORM 5 **OMB**

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Expires: Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL burden hours per OWNERSHIP OF SECURITIES response...

See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940

Form 4 Transactions

Reported

| 1. Name and Address of Reporting Person * Ziegler Marie Z. | | | 2. Issuer Name and Ticker or Trading Symbol | 5. Relationship of Reporting Person(s) to Issuer | | | |
|--|---------|----------|--|---|--|--|--|
| (Last) | (First) | (Middle) | QCR HOLDINGS INC [QCRH] 3. Statement for Issuer's Fiscal Year Ended | (Check all applicable) | | | |
| (Last) | (Flist) | (Middle) | (Month/Day/Year) 12/31/2013 | _X_ Director 10% Owner Officer (give title Other (specify | | | |
| 2252 SAINT ANDREWS CIRCLE | | | | below) below) | | | |
| (Street) | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | 6. Individual or Joint/Group Reporting | | | |
| | | | | (check applicable line) | | | |

BETTENDORF, IAÂ 52722

X Form Filed by One Reporting Person Form Filed by More than One Reporting Person

| (City) | (State) | (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | |
|--------------------------------------|---|--|---|--|---|-------------|---|--|---|--|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price | | | 5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 03/31/2013 | Â | P | 503.35 | A | | 10,901.4 | I | by Trust | |
| Common Stock | 06/30/2013 | Â | P | 475.69 | A | \$ 15.31 | 11,377.09 | I | by Trust | |
| Common Stock | 09/30/2013 | Â | P | 560.12 | A | \$ 16 | 11,937.21 | I | by Trust | |
| Common Stock | 12/31/2013 | Â | P | 434.77 | A | \$ 18.08 | 12,371.98 | I | by Trust | |
| | Â | Â | Â | Â | Â | Â | 16,008 | D | Â | |

3235-0362

January 31,

2005

1.0

Number:

Common Stock

Common Â Â Â Â Â 200 Ι by Spouse Stock

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

Persons who respond to the collection of information **SEC 2270** contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

| 1. Title of Derivative Security (Instr. 3) | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Tit Amou Unde Secur (Instr | int of rlying | 8. Price of Derivative Security (Instr. 5) |
|---|---|---|---|---|---------------------|--------------------|---|--|--|
| | | | | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |

Reporting Owners

Relationships Reporting Owner Name / Address Director 10% Owner Officer Other Ziegler Marie Z. ÂX Â Â Â 2252 SAINT ANDREWS CIRCLE BETTENDORF, IAÂ 52722

Signatures

By: Rick J. Jennings For: Marie Z. 02/11/2014 Ziegler

> **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).

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

Reporting Owners 2