**UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
Washington, D.C. 20549  

**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
   Dale Ajmere  
   1455 MARKET STREET, SUITE 600  
   SAN FRANCISCO, CA 94103

2. Issuer Name and Ticker or Trading Symbol  
   Square, Inc. [ SQ ]

3. Date of Earliest Transaction (MM/DD/YYYY)  
   4/19/2017

4. If Amendment, Date Original Filed (MM/DD/YYYY)
   
5. Relationship of Reporting Person(s) to Issuer  
   (Check all applicable)
   _____ Director  
   __ X Officer (give title below)  
   ___ 10% Owner  
   __ Other (specify below)
   Chief Accounting Officer

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

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Trans. Date</th>
<th>Trans. Code</th>
<th>Securities Acquired (A) or Disposed of (D)</th>
<th>Amount of Securities Beneficially Owned Following Reported Transaction(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class A Common Stock</td>
<td>4/19/2017</td>
<td>A</td>
<td>17689 (1)</td>
<td>147689</td>
</tr>
</tbody>
</table>

**Explanation of Responses:**

1. Each share is represented by a restricted stock unit (RSU). Each RSU represents a contingent right to receive one share of the Issuer's Class A Common Stock upon settlement. 1/16 of the RSUs vest on July 1, 2017, and 1/16 of the RSUs vest every three months thereafter.

**Reporting Owners**

<table>
<thead>
<tr>
<th>Reporting Owner Name / Address</th>
<th>Relationships</th>
</tr>
</thead>
</table>
| Dale Ajmere  
1455 MARKET STREET  
SUITE 600  
SAN FRANCISCO, CA 94103 | Director 10% Owner Officer Chief Accounting Officer |

**Signatures**

/s/ Jason Gao, Attorney-in-Fact  
4/21/2017

**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).


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.