Objective: Individuals with bipolar disorder (BD) frequently report cognitive difficulties, which can impact one’s well-being and functional outcome. Objective cognitive performance is a significant predictor of quality of life (QoL) in BD, but it is unclear whether self-reported cognitive complaints predict QoL. The purpose of this study was to evaluate the relationship between subjective cognitive complaints and self-reported QoL in BD, after accounting for mood symptoms and objective cognitive performance. Method: Sixty-three clinically stable outpatients diagnosed with BD (type I and II) completed subjective (Cognitive Failures Questionnaire; CFQ) and objective cognitive measures (verbal learning and executive functioning). Significant predictors of QoL (Quality of Life in Bipolar Disorder questionnaire), including CFQ scores, were assessed through multiple hierarchical regression. Results: Subjects reported moderate levels of subjective cognitive difficulties ($M = 42.57, SD = 17.89$) and reduced QoL ($M = 161.17, SD = 29.56$). After accounting for symptoms of depression ($R^2 = .47, p < .001$) and objective cognitive performance ($\Delta R^2 = .06, p < .05$), subjective cognitive complaints were negatively associated with QoL ($\Delta R^2 = .04, p < .05$). Conclusion(s): Increased cognitive complaints were associated with decreased QoL in BD, even after accounting for mood symptoms and objective cognitive functioning. Findings suggest that treatment strategies for restoring QoL in BD should target both subjective and objective aspects of cognitive function.