FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	-	2. Iss														
Name and Address of Reporting Person * Bigger Greggory M					2. Issuer Name and Ticker or Trading Symbol QS Energy, Inc. [QSEP]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 5266 HOLLISTER AVENUE, SUITE 219				3. Date of Earliest Transaction (Month/Day/Year) 01/01/2017						X Officer (give title below) Other (specify below) Chief Executive Officer						
(Street) SANTA BARBARA, CA 93111				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Own					ially Owned									
(Instr. 3) Date		Exe ar) any			(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)						wnership orm: irect (D)	Beneficial Ownership		
					Co	ode V Ar	(A) or (D)	Price	ce		(1)	mstr. 4)			
1. Title of Derivative Conversion Date Security or Exercise (Month/Day/Year) 3A. Deemed Execution Date any		(e.g., puts, calls, wa 4. 5. Number Transaction Derivative Code Securities (Instr. 8) Acquired Disposed			arrants, options, convertible securities) er of 6. Date Exercisable and Expiration Date Unc (Month/Day/Year) (Ins			ficially O ities) 7. Title Underl	tle and Amount of 8. Price of Derivative			Ownership				
	_	Code	v	5)		Date Exercisable	Expiration Date	Title	Nun	nber of		Reported	or Indirect	/		
5 01/01/2017	01/01/2017	A		/		01/01/2017	01/01/202	'7	non 1 00		<u>(1)</u>	5,462,592	D			
	(Street) (Street) (RA, CA 93111 (State) n a separate line for each contained by the contai	(Street) (Street) (RA, CA 93111 (State) 2. Transaction Date (Month/Day/Year) Table 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)	Code RA AVENUE, SUITE 219 01/01 (Street) 4. If A ARA, CA 93111 (State) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Code (Instr. 8)	Code V	ARA, CA 93111 (State) 2. Transaction Date (Month/Day/Year) Table II - Derivative Securities (e.g., puts, calls, war of the content of the	ARA, CA 93111 (State) 2. Transaction Date (Month/Day/Year) Table II - Derivative Securities Ac (e.g., puts, calls, warrant (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Instr. 8) (Month/Day/Year) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Date (Instr. 8) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Code V (A) (D)	RA, CA 93111 (State) 2. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 4. Solution Date (Month/Day/Year) 5. Number of Derivative Securities Expiration Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) Code V (A) Date Exercisable	ARA, CA 93111 (State) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Instr. 8) (A) or Disposed of (Instr. 8) (B) or Disposed of (In	(Street) (Street) (RA, CA 93111 (State) (Zip) (Zip) (A) (Zip) (A) (A) (Code (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (A) (A) (A) (A) (A) (A) (A) ((Street) (Street) (Street) (ARA, CA 93111 (State) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) 3. Transaction Code (A) or Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (Instr. 3 and 4) Persons who respond to the collective this form are not required to respond currently valid OMB control number. Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 3. Transaction Date (Month/Day/Year) (Instr. 3) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Instr. 3, 4, and 5) (Instr. 3, 4 and 6) (Instr. 4, 5 and 6 a	(Street) (Street) (RA, CA 93111 (State) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) (Month/D	Chief Example Chief Exampl	Chief Executive Office Chief Executive Office Chief Executive Office	Chief Executive Officer		

Banantina Oroman Nama / Addusas	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Bigger Greggory M 5266 HOLLISTER AVENUE SUITE 219 SANTA BARBARA, CA 93111	X		Chief Executive Officer				

Signatures

/s/ Greggory M. Bigger	01/26/2017
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).
- (1) The stock options reported under item 1 above were granted to each member of Issuer's Board as equity compensation under the Issuer's Board Compensation Policy, approved by the Board on 06/19/2015. The options granted under item 1 vest at the rate of 1/12 per month, commencing 01/01/2017, with full vesting on 12/31/2017.

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