FORM 4

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

OMB AP	PROVAL
OMB N	0005

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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).

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

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Name and Address of Reporting Person* Bunting Eric			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							
3606 CH	*	ER WAY, UNIT	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/10/2022				_ Officer (give	title below)	Othe	(specify below)				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person						
CARSON CITY, NV 89706								Form filed by More than One Reporting Person							
(Cit	y)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)			urity 2. Transacti Date (Month/Day		Execut any	Deemed oution Date,	Code (Instr.	4. Securities Ac (A) or Disposed (Instr. 3, 4 and 5		of (D) Own Tran	amount of Securities Beneficially ned Following Reported nsaction(s)		l (Ownership o Form: B	Beneficial
				(Monti	h/Day/Yea	r) Cod	e V A	(A) or	`	tr. 3 and 4)			Oirect (D) Or Indirect (I) Instr. 4)		
Reminder:	Report on a s	separate line for each	a class of securities b	eneficial	ly owned o	lirectly or	Person in this t	s who respon	equired to	respond u				74 (9-02)	
Reminder:	Report on a s	separate line for each		- Deriva	tive Secur	ities Acqu	Person in this t a curre	form are not rently valid OMI osed of, or Bene	equired to B control n eficially Own	respond u umber.				74 (9-02)	
Reminder: 1. Title of Derivative Security (Instr. 3)	•	3. Transaction Date (Month/Day/Year)	Table II 3A. Deemed Execution Date, if	- Derivat (e.g., pt 4. Transact Code	tive Secur uts, calls, v 5. Nu ion Derive Secur Acqui	ities Acquerrants, mber of attive tities red (A) sposed of 3, 4,	Person in this t a curre uired, Dispo options, co	form are not rently valid OMI osed of, or Beneral osecurities and Date	equired to B control n eficially Own	respond unber. ned Amounting	8. Price of		f 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indired Beneficia Ownersh (Instr. 4)	
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II 3A. Deemed Execution Date, if any	- Derivat (e.g., pt 4. Transact Code	tive Secur uts, calls, v 5. Nu Deriv. Secur Acqui or Dis (D) (Instr.	ities Acquarrants, mber of ative ities red (A) posed of 3, 4,	Person in this fa curred options, co	form are not rently valid OMI seed of, or Beneric of the security of the secu	equired to B control n eficially Own ities) 7. Title and of Underlyi Securities	respond unber. ned Amounting	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported	f 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indired Beneficial Ownersh (Instr. 4)	

Reporting Owners

D (O N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Bunting Eric 3606 CHALLENGER WAY UNIT #1 CARSON CITY, NV 89706	X					

Signatures

/s/ Eric Bunting	08/10/2022
**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) Reporting Person is exercising stock options granted on 01/01/2019. These stock options were granted to Reporting Person as equity compensation under Issuer's Board Compensation Policy, approved by the Board on 06/19/2015. The options fully vested on 12/31/2019.

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.