## FORM 4

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

OMB APPROVAL
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Estimated average burden
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).

#### 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

| (Print or Ty   | pe Response   | s)                                 |                      |  |   |        |       |   |                                  |   |   |   |  |   |                                      |  |                        |     |
|--|---|------------------------------------|----------------------|--|---|--------|-------|---|----------------------------------|---|---|---|--|---|--------------------------------------|--|------------------------|-----|
| Name and Address of Reporting Person * Nelson Christopher M. |   |                                    |                      |  | 2. Issuer Name and Ticker or Trading Symbol Q2Power Technologies, Inc. [qpwr] |        |       |   |                                  |   |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner |  |   |                                      |  |                        |     |
| (Last) (First) (Middle)<br>420 ROYAL PALM WAY, SUITE #100    |   |                                    |                      |  | 3. Date of Earliest Transaction (Month/Day/Year) 02/27/2017                   |        |       |   |                                  |   |   | X Officer (give title below) Other (specify below) CEO  |  |   |                                      |  |                        |     |
| (Street)   |   |                                    |                      | 4. If                                    | 4. If Amendment, Date Original Filed(Month/Day/Year)                          |        |       |   |                                  | -   | 6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person |   |  |   |                                      |  |                        |     |
| PALM BEACH, FL 33480 (City) (State) (Zip)                    |   |                                    |                      | Table I - Non-Derivative Securities Acqu |   |        |       |   | Acqui                            | nired, Disposed of, or Beneficially Owned |   |   |  |   |                                      |  |                        |     |
| 1.Title of Security<br>(Instr. 3)                            |   |                                    |                      |  | Code<br>(Instr. 8)  |        | tion  | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |                                  |   | Beneficially Owned Follo<br>Reported Transaction(s)   |   | Following  | 6.<br>Ownership<br>Form:                        | Beneficia                            | ect<br>al                                      |                        |     |
|  |   |                                    |                      | (Mon                                     | th/Day/Year   | Coo    | de    | V   | Amou                             | nt  | (A)<br>or<br>(D)  | ŕ   |  | and 4)  |                                      | Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4) | Ownershi<br>(Instr. 4) |     |
| Common   | Stock   |                                    | 02/27/2017           |  |   | P      | •     |   | 5,000,0<br>(1)                   | 000                                       | $\Delta$  | \$<br>0.02  | 6,537,2  | .00   |                                      | D  |                        |     |
| common stock 03/2  |   | 03/31/2017                         |                      |  | P   |        |       | 666,66  | 7                                |   | \$<br>0.15  | 7,203,867   |  | D   |                                      |  |                        |     |
| Reminder:  | Report on a s   | separate line                      | For each class of so |  | beneficially of   |        |       | Per<br>con<br>the   | sons wh<br>tained in<br>form dis | no re<br>n thi<br>splay                   | s form  | m are<br>currer   | not requ<br>itly valid   |   | ormation<br>spond unle<br>trol numbe | ss   | 1474 (9-0.             | )2) |
|  |   | 1                                  |                      | (e.g.,                                   | puts, calls, v  | arrant | s, op | tion  | s, conver                        | tible                                     | secur   | ities)  |  | 1   | ı                                    |  |                        |     |
| Security   | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transacti<br>Date<br>(Month/Day | Execution Date, if T | Code                                     | ransaction Number of  |        | and   | and Expiration Date (Month/Day/Year)                              |                                  | Amo<br>Unde<br>Secu                       | tle and<br>ount of<br>erlying<br>rities<br>r. 3 and   | Derivative<br>Security<br>(Instr. 5)  | 9. Number of<br>Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | Owners Form o Derivat Securit Direct ( or India | ship of Ind Benef Owne (Instr.       | Beneficial<br>Ownershij<br>(Instr. 4)          |                        |     |
|  |   |                                    |                      |  | Code V  | (A)    | (D)   | Dat<br>Exe  | te<br>ercisable                  | Expi<br>Date                              | ration  | Title   | Amount<br>or<br>Number<br>of<br>Shares   |   |                                      |  |                        |     |

### **Reporting Owners**

|   | Relationships |              |         |       |  |  |
|---|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address  | Director      | 10%<br>Owner | Officer | Other |  |  |
| Nelson Christopher M.<br>420 ROYAL PALM WAY, SUITE #100<br>PALM BEACH, FL 33480 | X             |              | CEO     |       |  |  |

#### **Signatures**

| Christopher Nelson              | 05/17/2017 |
|---------------------------------|------------|
| **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) These shares (5,000,000 of common stock) are subject to complete forfeiture if certain contractual milestones and obligations are not completed, and the employee does not remain with the Company for a period of at least 12 to 18 months from issuance.

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.