# FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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

Print or Type Responses)  1. Name and Address of Reporting Person * TIERNEY THOMAS T				2. Issuer Name and Ticker or Trading Symbol CNS RESPONSE, INC. [CNSO]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director _X_ 10% Owner					
(Last) (First) (Middle) C/O CNS RESPONSE, INC., 85 ENTERPRISE, SUITE 410					3. Date of Earliest Transaction (Month/Day/Year) 03/19/2013							Office	r (give title belo	ow)	Other (specify b	elow)
(Street) ALISO VIEJO, CA 92656				4. If A	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City	(City) (State) (Zip)				Table I - Non-Derivative Securities Acqu						Acqui	lired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execu any			ansact r. 8)	4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)			Beneficia Reported	mount of Securities eficially Owned Following orted Transaction(s)		Ownership Form:	Beneficial		
				(Mont	(Month/Day/Year		de	V Aı	nount	ount (A) or (D) Pr		(Instr. 3 and 4)		or (I)	\ /	Ownership Instr. 4)
Common	Stock		03/19/2013			JĹ	<u>1)</u>	40	0,000		\$ 0.25	4,803,3	49		I	Trust (2)
Reminder:	Report on a s	separate line fo	or each class of seco	urities be	eneficially o	wned d	directly	y or indi	rectly.							
Reminder:	Report on a s	separate line fo		- Deriva	ative Securit	ties Ac	F c t	Persons contain the forn	s who ed in t n disp	this for lays a o	m are currer eficiall	not requ itly valid	ction of inf uired to res OMB conf	spond unle	SS	1474 (9-02)
1. Title of Derivative Security		3. Transaction	Table II -	Deriva	ative Securit uts, calls, w 4. Transaction Code (Instr. 8)	ties Ac arrant	quireces, option	Persons contain the forn	s who ed in to n disp esed of, nvertib Exercise	this for lays a control of or Bendole secun sable Date	eficiallrities) 7. Ti Amo Unde	not required the and the and the and the erlying	OMB conf	spond unle	of 10. Ownersl Form of Derivati Security Direct (l or Indire	11. Nature of Indire Beneficie Ownersl (Instr. 4)

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
TIERNEY THOMAS T C/O CNS RESPONSE, INC. 85 ENTERPRISE, SUITE 410 ALISO VIEJO, CA 92656	X	X				

# **Signatures**

/s/ Thomas T. Tierney	06/06/2013
**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) Purchased in a private placement of securities by the issuer.
- (2) Shares are held in the name of the Thomas T. and Elizabeth C. Tierney Family Trust of which Mr. Tierney is a trustee.

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.