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

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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 Ty	pe Response	s)																	
1. Name and Address of Reporting Person* FOLLMAN ROBERT J					2. Issuer Name and Ticker or Trading Symbol CNS RESPONSE, INC. [CNSO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner						
(Last) (First) (Middle) C/O CNS RESPONSE, INC., 85 ENTERPRISE, SUITE 410					3. Date of Earliest Transaction (Month/Day/Year) 07/08/2014							Office	r (give title belo	ow)	Other	(specify be	low)		
(Street) ALISO VIEJO, CA 92656				4. It	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							
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Ye	Executar)		, if	Code (Instr. 8)		4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)			Beneficia Reported	ount of Securities cially Owned Following ed Transaction(s)		For	nership m:	7. Nature of Indirect Beneficial		
				(Mo	nth/Day/Ye	ar)	Coe	de	V	Amour	nt	(A) or (D)	Price	(Instr. 3 and 4)			or In	\ /	Ownership (Instr. 4)
Common	Stock		07/08/2014				A	1)		400,00	00		\$ 0.25	6,491,3	10		I	,	Trust (2)
			Table 1		vative Secu			quire	the '	form dis	spla of, o	nys a c or Bene	currer eficiall	itly valid	OMB con	spond unle trol numbe			
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	3A. Deemed Execution Da	ed Date, if	tte, if Transaction Code Year) (Instr. 8)		5.		and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Security (Instr. 5)	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	y 1 1 1 1 1 1 1 1 1	10. Ownersh Form of Derivativ Security: Direct (D or Indirec (I) (Instr. 4)	Benefici Ownersh : (Instr. 4)		
					Code	V	(A)	(D)	Date Exe	-	Exp Date	oiration e	Title	Amount or Number of Shares					
Repor	ting O	wners			Code	V	(A)	(D)	EXC	icisauie	Dati			_					

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

Signatures

/s/ Robert J. Follman	07/09/2014
**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 Declaration of Trust of Robert J. Follman and Carole A. Follman, dated August 14, 1979 of which Mr. Follman 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.