FORM 4

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

OMB APPROVAL
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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* Bennington Charles Warren | | | | | | 2. Issuer Name and Ticker or Trading Symbol TransBiotec, Inc. [IMLE] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| (Last) (First) (Middle) 400 N. TUSTIN AVE., SUITE 225 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/28/2019 | | | | | | | X Officer (give title below) Other (specify below) CEO, President and Secretary | | | | | |
| (Street) SANTA ANA, CA 92705 | | | | | 4. If | 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 Acqu | | | | | | Acquir | ired, Disposed of, or Beneficially Owned | | | | | | |
| 1.Title of Security (Instr. 3) | | Date Ex (Month/Day/Year) and | | Execution | A. Deemed secution Date, it by Month/Day/Year | | Code | | 4. Securities Acquired (A) of Disposed of (D) (Instr. 3, 4 and 5) | | | (A) or | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | Ownership Form: E Direct (D) | Beneficial Ownership | | |
| | | | | | | | | Code | V | Amour | nt | (A) or (D) | Price | | (| | or Indirect (I) (Instr. 4) | (Instr. 4) |
| Common Stock | | | 08/28/2 | /2019 | | | | P ⁽¹⁾ | | 14,000,0 | 000 | | | 15,004,422 | | | D | |
| Reminder: | Report on a s | separate lin | e for each | | I - Deriv | vative Sec | urit | ies Ac | quire | Persons w contained | ho r in th ispla | nis form ays a coor or Bene | m are i current | not requ lly valid | uired to res | ormation spond unle rol numbe | ss | 1474 (9-02) |
| Security | Conversion Date | | Day/Year) Execution any | | ed Date, if | | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Titl Amou Under Securi (Instr. 4) | int of lying | Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownershi Form of Derivative Security: Direct (D or Indirect | Beneficia Ownersh (Instr. 4) | |
| | | | | | | Code | V | (A) | (D) | Date Exercisable | | oiration te | Title | Number of Shares | | | | |

Reporting Owners

| D (1 0 N / | Relationships | | | | | | | |
|---|---------------|--------------|------------------------------|-------|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | |
| Bennington Charles Warren 400 N. TUSTIN AVE. SUITE 225 SANTA ANA, CA 92705 | X | | CEO, President and Secretary | | | | | |

Signatures

| /s/ Charles Bennington | 09/13/2019 |
|---------------------------------|------------|
| **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 Reporting Person acquired 14,000,000 shares of the Issuer's common stock in exchange for forgiving \$595,000 owed to him as accrued salary under the terms of a Common Stock Purchase Agreement.

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.