

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

OMB APPROVAL
OMB Number: 3235-0076
Expires: August 31, 2015
Estimated Average burden hours per response: 4.0

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			<u>'</u>
1. Issuer's Identity			
CIK (Filer ID Number)	Previous Name(s)	None	Entity Type
0001537435	TECOGEN INC		© Corporation
Name of Issuer			C Limited Partnership
TECOGEN INC.			C Limited Liability Company
Jurisdiction of Incorporation/Organization			C General Partnership
DELAWARE			C Business Trust
Year of Incorporation/Organization	ation		C Other
• Over Five Years Ago			Other
Within Last Five Years (Specify Year)			
C Yet to Be Formed			
O Daineire I Diese of	D	O	t'
2. Principal Place of	Business and (Contact Into	ormation
TECOGEN INC.			
Street Address 1		Street Address 2	
45 FIRST AVENUE		Street Address 2	
City	State/Province/Country	ZIP/Postal	Code Phone No. of Issuer
WALTHAM	MASSACHUSETTS	02451	781-466-6400
WALTHAM	WASSACHUSETTS	02451	/81-400-0400
3. Related Persons			
o. Related Fersons			
Last Name	First Name		Middle Name
Galiteva	Angelina		M
Street Address 1		Street Address 2	
45 First Ave		c/o Tecogen Inc	
City	State/Province/Cou	ntry	ZIP/Postal Code
Waltham	MASSACHUSET	TS	02451
Relationship: Exc	ecutive Officer	Director	Promoter
Clarification of Response (if Neces	sary)		
Į .			
Last Name	First Name		Middle Name
Hatsopoulos	John		N
Street Address 1		Street Address 2	U [L

45 First Ave

c/o Tecogen Inc.

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Waltham	MASSACHUSETTS	02451
Relationship: Execu	utive Officer	Promoter
Clarification of Response (if Necessal	ry)	
		_
Last Name	First Name	Middle Name
Lewis	Earl	R
Street Address 1	Street Address	
45 First Ave	c/o Tecogen II	
City	State/Province/Country	ZIP/Postal Code
Waltham	MASSACHUSETTS	02451
Relationship: Execu	ntive Officer	Promoter
	Forms()	I Tolliotti
Clarification of Response (if Necessal	ry)	
Last Name	First Name	Middle Name
Maxwell	Charles	T
Street Address 1	Street Address	
45 First Ave	c/o Tecogen I	
City	State/Province/Country	ZIP/Postal Code
Waltham	MASSACHUSETTS	02451
Relationship:	ntive Officer Director	Promoter
Clarification of Response (if Necessal	rv)	
Clarification of Response (if Recessar	11)	
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4. Industry Group	Health Care	
C Agriculture	C Biotechnology	C Retailing
Banking & Financial Services	C Health Insurance	C Restaurants
C Commercial Banking	C Hospitals & Physicians	Technology
C Insurance	C Pharmaceuticals	C Computers
C Investing	Other Health Care	C Telecommunications
C Investment Banking C Pooled Investment Fund		Other Technology
Other Banking & Financial		Travel
C Services	• Manufacturing	C Airlines & Airports
C Business Services	Real Estate	C Lodging & Conventions
Energy	C Commercial	C Tourism & Travel Services
C Coal Mining	C Construction	C Other Travel
C Electric Utilities	C REITS & Finance	O Other
C Energy Conservation C Environmental Services	Other Real Estate	
Lari onnichtal Sci vices		

C	Oil & Gas	
C	Other Energy	
- Ic	suer Size	
	e Range	Aggregate Net Asset Value Range
evenu)	No Revenues	No Aggregate Net Asset Value
5	\$1 - \$1,000,000	S1 - \$5,000,000
5	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000
5	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000
)	\$25,000,001 - \$100,000,000	\$50,000,001 - \$100,000,000
)	Over \$100,000,000	Over \$100,000,000
)	Decline to Disclose	C Decline to Disclose
)	Not Applicable	C Not Applicable
F	ederal Exemption(s) and Exclusion(s) Claimed (select all that
, i d ippl	• •	c) and Excitation(c) claimed (delect all that
Т	Rule 504(b)(1) (not (i), (ii)	Dulo 505
0	or (iii))	- Kute 303
	Rule 504 (b)(1)(i)	Rule 506(b)
F	Rule 504 (b)(1)(ii)	Rule 506(c)
Ī F	Rule 504 (b)(1)(iii)	Securities Act Section 4(a)(5)
		Investment Company Act Section 3(c)
_	ype of Filing w Notice Date of First S	ale 2015-12-28 First Sale Yet to Occur
A	mendment	
. D	uration of Offering	
		last more than one year?
oes th	e Issuer intend this offering to	last more than one year? Yes No
. T	ype(s) of Securitie	s Offered (select all that apply)
Po	oled Investment Fund	▼ Equity
	terests mant-in-Common Securities	Debt
		Option, Warrant or Other Right to
	ineral Property Securities curity to be Acquired Upon	Acquire Another Security
Ex	curity to be Acquired Upon tercise of Option, Warrant or ther Right to Acquire Security	Other (describe)
	- ^ "	
10. I	Business Combina	tion Transaction
		ion with a business combination C Yes No
ansac	tion, such as a merger, acquisi	tion or exchange offer?
larific	eation of Response (if Necessar	<u>y)</u>
		ll l

11. Minimum Investment	
Minimum investment accepted from any outside investor	\$ USD
12. Sales Compensation	
Recipient	Recipient CRD Number None
N/A	
(Associated) Broker or Dealer None	(Associated) Broker or Dealer CRD
	Number
St. (A)	St. (All 2
Street Address 1 N/A	Street Address 2
City	State/Province/Country ZIP/Postal Code
N/A	Unknown 00000
State(s) of Solicitation	▼ Foreign/Non-US
All States	17 A OF OR THOR TO U
13. Offering and Sales Amour	nts
Total Offering Amount \$ 3000000	USD 🗆 Indefinite
Total Amount Sold \$ 3000000	USD
Total Remaining to be Sold \$	USD ☐ Indefinite
Clarification of Response (if Necessary)	
14. Investors	
14. 111000010	
Select if securities in the offering have be do not qualify as accredited investors,	
Number of such non-accredited investor offering	s who already have invested in the
Regardless of whether securities in the o	ffering have been or may be sold to
persons who do not qualify as accredited of investors who already have invested in	l investors, enter the total number
or micesors who ancauy have invested if	· me onering.
15. Sales Commissions & Find	ders' Fees Expenses
	ons and finders' fees expenses, if any. If the amount of an
expenditure is not known, provide an estimate and	d check the box next to the amount.
Sales Commissions \$ 0	USD Estimate
Finders' Fees \$ 0	USD Estimate
Clarification of Response (if Necessary)	

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to
any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above
If the amount is unknown, provide an estimate and check the box next to the amount.

	\$ 0	USD	Estim	ate
Clarification of Response (if Necessary)				

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities
 described and undertaking to furnish them, upon written request, the information furnished to
 offerees
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
TECOGEN INC.	/s/ David A. Garrison	David A. Garrison	CFO	2016-01-14