

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

OMB APPROVAL					
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INITIAL STATEMENT OF 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

Name and Address of Reporting Person GHONIEM AHMED		2. Date of Event Requiring Statement (Month/Day/Year)		0	3. Issuer Name and Ticker or Trading Symbol TECOGEN INC. [TGEN]					
(Last) (First) 99 HIGH ST.	(Middle)	03/09/2022		4. Rela Issuer	Lelationship of Reporting Person(s) to ler			5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) WINCHESTER, MA 01890					0% Owner Other (specify Ap)		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	-Derivati	ve Securities	Bene			
1.Title of Security (Instr. 4)				ount of Securities cially Owned 4)	H ((3. Ownership Form: Direct D) or Indirect I) Instr. 5)	4. Natu (Instr. :		Beneficial Ownership	
Reminder: Report on a separate line									SEC 1473 (7-02	
Person	the form displa	ys a curr	ently valid O	formation cont	nber.		•	·		
Person	e II - Derivative Solution 2. Date Expirat	ys a curr	ently valid O Beneficially O		nber. calls, warra unt of lying		nvertib on 5.	·		
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Reporting Owners

Donouting Owner Name /	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
GHONIEM AHMED 99 HIGH ST. WINCHESTER, MA 01890	X				

Signatures

/s/ Ahmed Ghoniem	03/11/2022
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) Vests 25% per year
- (2) Vests 20% per year

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.