

Mobiquity Technologies, Inc.
 Form 4
 April 22, 2015

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
 Expires: January 31, 2015
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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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
 Julia Dean L.

2. Issuer Name and Ticker or Trading Symbol
 Mobiquity Technologies, Inc.
 [MOBQ]

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)

(Last) (First) (Middle)
 600 OLD COUNTRY ROAD,
 SUITE 541
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)
 04/22/2015

Director 10% Owner
 Officer (give title below) Other (specify below)
 Co-CEO

GARDEN CITY, NY 11530

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 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/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership Indirect Beneficial Ownership (Instr. 4)		
				(A) or (D)	Code	V	Amount	(D)	Price

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transaction	5. Number of Derivative Securities	6. Date Exercisable and Expiration Date	7. Title and Underlying
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Security (Instr. 3)	or Exercise Price of Derivative Security	any (Month/Day/Year)	Code (Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)	(Instr. 3 and 4)	(Month/Day/Year)		Title
							Date Exercisable	Expiration Date	
Common Stock Options	\$ 0.59	03/01/2014	D ⁽²⁾		100,000	03/01/2014	03/01/2024		Common Stock
Common Stock Options	\$ 0.3	04/22/2015	A	300,000 ⁽⁴⁾		04/22/2015 ⁽³⁾	04/22/2025		Common Stock

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Julia Dean L. 600 OLD COUNTRY ROAD, SUITE 541 GARDEN CITY, NY 11530	X		Co-CEO	

Signatures

/s/ Dean L. Julia 04/22/2015

 **Signature of Date
Reporting Person

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) Not applicable

(2) Options terminated as these options were not approved by the board on the date of the original Form 4 filing, but have now been granted effective April 22, 2015.

(3) These options are exercisable the later of April 22, 2015 or the date that the issuer's stockholders approve an increase in the authorized number of shares underlying the issuer's 2009 Plan.

(4) This represents 100,000 options granted to Mr. Julia as a director, plus 100,000 options granted to Mr. Julia pursuant to this employment agreement for 2014 and 2015.

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.