Farrar Graham
C/O MASSROOTS, INC., 7083 HOLLYWOOD BLVD.
LOS ANGELES, CA 90028

1. Name and Address of Reporting Person *

2. Issuer Name and Ticker or Trading Symbol
MassRoots, Inc. [ MSRT ]

3. Date of Earliest Transaction (MM/DD/YYYY)
7/26/2018

4. If Amendment, Date Original Filed

5. Relationship of Reporting Person(s) to Issuer
   (Check all applicable)
   ___ X __ Director
   _____ 10% Owner
   _____ Officer (give title below)
   _____ Other (specify below)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Trans. Date</th>
<th>Trans. Code</th>
<th>Securities Acquired or Disposed of</th>
<th>Amount of Securities Beneficially Owned Following Reported Transaction(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Option to purchase common stock</td>
<td>7/26/2018</td>
<td>J (1)</td>
<td>500000</td>
<td>500000</td>
</tr>
</tbody>
</table>

(1) The Issuer issued the Reporting Person a ten-year option to purchase up to 500,000 shares of the Issuer's common stock at an exercise price of $0.20 per share pursuant to the Issuer's 2018 Equity Incentive Plan. The option vests in full immediately on the day of grant.

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

<table>
<thead>
<tr>
<th>Title of Derivative Security</th>
<th>Conversion or Exercise Price of Derivative Security</th>
<th>Trans. Date</th>
<th>Trans. Code</th>
<th>Number of Derivative Securities Acquired (A) or Disposed of (D)</th>
<th>Date Exercisable</th>
<th>Expiration Date</th>
<th>Title of Underlying Derivative Security</th>
<th>Amount or Number of Shares</th>
<th>Price of Derivative Security</th>
<th>Ownership Form of Derivative Security: Direct (D) or Indirect (I)</th>
<th>Nature of Indirect Beneficial Ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Option to purchase common stock</td>
<td>$0.20</td>
<td>7/26/2018</td>
<td>J (1)</td>
<td>500000</td>
<td>7/26/2018</td>
<td>7/26/2028</td>
<td>Common stock</td>
<td>500000</td>
<td>S0</td>
<td>D</td>
<td></td>
</tr>
</tbody>
</table>

Reporting Owners

<table>
<thead>
<tr>
<th>Reporting Owner Name / Address</th>
<th>Relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Farrar Graham C/O MASSROOTS, INC. 7083 HOLLYWOOD BLVD. LOS ANGELES, CA 90028</td>
<td>X</td>
</tr>
</tbody>
</table>

Signatures

/s/ Graham Farrar

Date 8/1/2018

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

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).


Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.