

SCIO DIAMOND TECHNOLOGY CORP

Reported by WOLKOWITZ BENJAMIN

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 12/23/14 for the Period Ending 12/22/14

Address 411 UNIVERSITY RIDGE, SUITE D

GREENVILLE, SC 29601

Telephone 864.346.2733

CIK 0001488934

Symbol SCIO

SIC Code 3290 - Abrasive, Asbestos, And Miscellaneous

Industry Constr. - Supplies & Fixtures

Sector Capital Goods

Fiscal Year 03/31



[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

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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

| 1. Name and Address of Reporting Person * | | | | 2. | 2. Issuer Name and Ticker or Trading Symbol | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|---|-------------------------|-----------|---------------------------------|-----------------|---|----------------------|-------------------------------------|-------|--------|----------------------------|--|-----------------------|--|---|--------------------------|---------------------------------------|--|------------|
| Wolkowitz Benjamin | | | | | Scio Diamond Technology Corp [SCIO] | | | | | | | | | X Director | r | | 10% Owr | ner |
| (Last) | (Last) (First) (Middle) | | | | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | | YYYY | Officer (give title below) Other (specify below) | | | | | |
| 32 DELLWOOD DRIVE | | | | | 12/22/2014 | | | | | | | | | | | | | |
| (Street) | | | | 4. (M | 4. If Amendment, Date Original Filed (MM/DD/YYYY) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| MADISON, NJ 07940 (City) (State) (Zip) | | | | | | | | | | | | | _ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tal | ble I - No | n-Deri | ivati | ve Securi | ties A | cqu | ire | d, Di | spose | d of, | or Be | neficially O | • | | -8 | |
| | | | | 2. Tran Date | | | 3. Tra Code (Instr. | | A D | Dispose | ities d (A) or d of (D) , 4 and 5 | Followin (Instr. 3 | | 3 and 4) | | Ownership of Form: Be Direct (D) | Beneficial Ownership | |
| | | | | | | | Cod | le V | v A | Amount | (A) or (D) | Price | | | | | or Indirect (I) (Instr. 4) | (Instr. 4) |
| Common Stock 12 | | | | 12/22/ | /2014 | | P | | 1 | (1) | A | \$.30 | | 158333 | | | D | |
| | Table II | - Derivat | ive Secur | ities B | enef | icially O | wned | (e.g | · ,] | puts, | calls, | war | rants, | , options, coi | nvertible | securities |) | ' |
| Security Conversion Date Deemed Coo | | | 4. Trans. Code (Instr. 8) |) E | . Number of Derivative Se acquired (A) Disposed of (I Instr. 3, 4 and | curities or D) | | | | | | | | Derivative Security | derivative Securities | Ownership Form of Derivative Ow | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | | | Date Expiration Exercisable Date | | Title | Amount or Number of Shares | | | Reported Transaction (s) (Instr. 4) | (I) (Instr. 4) | | | | |

Explanation of Responses:

(1) Purchased in a private placement of securities by the Issuer.

Reporting Owners

| Reporting Owners | | | | | | | | | |
|--------------------------------|----------|---------------|---------|-------|--|--|--|--|--|
| Danastina Ossman Nama / Addus | | Relationships | | | | | | | |
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | | |
| Wolkowitz Benjamin | | | | | | | | | |
| 32 DELLWOOD DRIVE | X | | | | | | | | |
| MADISON, NJ 07940 | | | | | | | | | |

Signatures

/s/ Blake Cooper, Attorney-in-Fact

** Signature of Reporting Person

12/23/2014

Date

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).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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.