FORM 4	ļ
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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).

### 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

(Print or Type Responses)										
1. Name and Address of Reporting Person – Davis William H	2. Issuer Name and TELKONET INC		Гradi	ng Symbo	01	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 10200 INNOVATION DRIVE, SUITE 300	3. Date of Earliest T 10/01/2012	ransaction (	Mont	h/Day/Ye	ar)	Officer (give title below)	ther (specify belo	ow)		
(Street) MILWAUKEE, WI 53226	4. If Amendment, Date Original Filed(Month/Day/Year)						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-Derivative Securities Acqui						ired, Disposed of, or Beneficially Owned			
1.Title of Security     2. Transaction       (Instr. 3)     Date       (Month/Day/Year	· ·	(Instr. 8)		(A) or Disposed of (D)			Owned Following Reported Transaction(s)	6. Ownership Form:	Beneficial	
	(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Reminder: Report on a separate line for each class of securitie	s beneficially owned			•	respon	d to t	the collection of information	SEC	1474 (9-02)	

Persons who re	espond to the collection of information	SE
contained in thi	is form are not required to respond unless the	
form displays a	currently valid OMB control number	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Number	r of	6. Date Exer	cisable	7. Title and	Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Derivative	;	and Expirati	on Date	of Underly	ng	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)				(Month/Day/Year) Securities			Security			Beneficial			
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)			1 ( )		(Instr. 3 and 4) (Instr. 5)		(Instr. 5)		Derivative		
	Derivative					or Dispose	ed							Security:	(Instr. 4)
	Security					of (D)							0	Direct (D)	
						(Instr. 3, 4	,						1	or Indirect	
						and 5)	-						Transaction(s)	< / <	
											Amount		(Instr. 4)	(Instr. 4)	
								Date	Expiration	Title	or				
				C 1	v			Exercisable	Date		Number				
				Code	v	(A)	(D)				of Shares				
Employee															
Stock										a					
Option	\$ 0.187	10/01/2012		А		100,000		<u>(2)</u>	<u>(3)</u>	Common	100.000	\$ 0	100.000	D	
(right to						,				Stock			,	_	
buy) (1)															

### **Reporting Owners**

Demontine Operation News ( Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Davis William H 10200 INNOVATION DRIVE SUITE 300 MILWAUKEE, WI 53226	х							

## Signatures

/s/ James J. Schilling, power of attorney	10/03/2012
**Signature of Reporting Person	Date

# **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) Options granted pursuant to the 2012 Board of Directors Compensation Policy.

(2) Options vest quarterly over 5 years.

(3) This option expires on the earlier of the ten year anniversary or one year from employment separation

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.