FORM 4	-
--------	---

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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

(Finit of Type Responses)	1						1				
 Name and Address of Reporting Person [*] Reinders Gerrit J. 	2. Issuer Name a TELKONET IN			ing Symb	ol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 10200 INNOVATION DRIVE #300	3. Date of Earliest 04/18/2013	Transaction	(Mon	nth/Day/Y	ear)	X Officer (give title below) Other (specify below) Exec. VP Global Mktg/Sales					
(Street)	4. If Amendment,	Date Origina	l File	d(Month/Da	y/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person					
MILWAUKEE, WI 53226							Form filed by More than One Reporting Person				
(City) (State) (Zip)	r	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security 2. Transacti (Instr. 3) Date (Month/Day	Execution Date, if	Execution Date, if Code				f(D)	0 1	Ownership of Indire	7. Nature of Indirect Beneficial		
	(Month/Day/Year	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		

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

Persons who respond to the collection of information SEC 1474 (9-02) contained in this 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		6. Date Exercisable		7. Title and		8. Price of	9. Number of	10.	11. Nature		
Derivative	Conversion	Date	Execution Date, if	Transact	ction of		and Expiration Date		Amount of		Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)		Code		Derivativ	ative (Month/Day/Year)		/Year)	Underlying		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Securitie	s					(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acquired	1			(Instr. 3 and 4)					(Instr. 4)
	Security					(A) or							0	Direct (D)	
						Disposed	1 01	f					1	or Indirect	
						(D) (Instr. 3,	4						Transaction(s) (Instr. 4)	(1) (Instr. 4)	
						(1150.5) and 5)	4,						(IIISU. 4)	(11150.4)	
						und 5)		-							
											Amount				
								Date	Expiration	Title	or Number				
								Exercisable	Date		of				
				Code	v	(A)	(D)				Shares				
Employee															
Stock										-					
Option	\$ 0.18	04/18/2013		А		87,500		(2)	<u>(3)</u>	Common Stock	87 500	\$ 0	87,500	D	
(right to	ψ 0.10	01/10/2015		11		07,500				Stock	07,500	ΨŪ	07,500	D	
buy) (1)															

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Reinders Gerrit J. 10200 INNOVATION DRIVE #300 MILWAUKEE, WI 53226			Exec. VP Global Mktg/Sales						

Signatures

/s/ Gerrit J. Reinders	09/12/2013	
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 Senior Management Executive Incentive Plan

(2) Options vest immediately.

(3) This option expires on the earlier of the ten year anniversary or 180 days 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.