# FORM 4

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

OMB APPR	ROVAL			
DMB Number:	3235-0287			
Estimated average burden				
ours per respons	e 0.5			

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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *  Davis William H				2. Issuer Name and Ticker or Trading Symbol TELKONET INC [TKOI.OB]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 20800 SWENSON DR., SUITE 175				3. Date of Earliest Transaction (Month/Day/Year) 11/03/2014						Officer (give title below) Other (specify below)						
(Street) WAUKESHA, WI 53186			4. If	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					Acqui	red, Dispo	osed of, or l	Beneficially	Owned		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year		Exec r) any	2A. Deemed Execution Date, if any (Month/Day/Year)		f Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			1 5. Amount of Securities Beneficially Owned Followin Reported Transaction(s) (Instr. 3 and 4)		Following	Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
						Coe	de	V	Amount	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock		11/03/2014			P			9,375 (1)	A	\$ 0.158	1,356,31	.6		D	
Reminder:	Report on a	separate line f	or each class of se	curities	beneficially	owned o	lirect	tly or								
	Report on a	separate line f			beneficially		P c ti	Personta he fo	ons who ained in orm dis	this fo	orm are	e not requently valid	uired to re I OMB cor	formation spond un trol numb	less	EC 1474 (9- 02)
Reminder: indirectly.		•	Table II	Deriva	ntive Securiti uts, calls, wa	ies Acq	P c tl uired	Personta conta he fo	ons who ained in orm dis sposed or converti	this for plays a	orm are a curre neficial urities)	e not requesting ntly valid	uired to re I OMB cor	spond un ntrol numb	less er.	02)
Reminder: indirectly.	2. Conversion	3. Transactio	Table II  n 3A. Deeme Execution	<b>Deriva</b> (e.g., p d Date, if	ative Securiti uts, calls, wa 4. Transaction Code	ies Acq arrants, 5. Nun of	uired, optionber of titles red sed 3,	Personta he for l, Distons, 6. Da	ons who ained in orm dis	this for plays a f, or Be ible security is able on Date	neficial urities) 7. Ti Amo Undo Secu	e not requested in the not req	uired to re I OMB cor 8. Price of	spond un	of 10. Owners: Porrivati Security Direct (i	11. Natural of Indire Beneficion (Instr. 4)

### **Reporting Owners**

Donostino Osmon Nomo / Adduses	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Davis William H 20800 SWENSON DR. SUITE 175 WAUKESHA, WI 53186	X					

## **Signatures**

/s/ James J. Schilling, power of attorney	11/03/2014
**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).
- $\textbf{(1)} \ Table \ I, Item \ 4 -- \ Represents \ purchase \ by \ the \ reporting \ person \ on \ the \ open \ market \ per \ Rule \ 10b \ 5-1.$

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

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 nu	mber.