FORM 4

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

OMB APPRO	OVAL
OMB Number:	3235-0287
Estimated average	burden
hours per response	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

(Print or Ty	pe Response	es)															
Name and Address of Reporting Person * Sobieski Jeff					2. Issuer Name and Ticker or Trading Symbol TELKONET INC [TKOI]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
	(Last) (First) (Middle) 20800 SWENSON DR. SUITE 175					3. Date of Earliest Transaction (Month/Day/Year) 01/22/2015						X Officer (give title below) Other (specify below) Chief Technology Officer					
(Street)					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						
WAUKE	SHA, WI 5	3186											one reporting				
(City	')	(State)	(Zip)		Ta	ble I - Non-	-Deri	vative S	ecurities	s Acqu	ired, Disp	osed of, or	Beneficially	Owned			
1.Title of Security (Instr. 3)		:	2. Transaction Date (Month/Day/Y	ear) any	eemed tion Date, it h/Day/Year	f Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Follow Reported Transaction(s) (Instr. 3 and 4)		Following	wing Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code V		(A) or Amount (D) F								
Common Stock 01/2			01/22/2015			P		3,333 (1)	I A	\$ 0.183	1,104,64	18		D			
indirectly.					0 11		cont the f	ained i	n this fo splays a	orm ar	e not req	uired to re	nformation espond unl ntrol numb	less	EC 1474 (9- 02)		
			Table I			ies Acquire arrants, opt						l					
Security	Conversion	3. Transaction Date (Month/Day/Y	Execution (ear)	ned 4 n Date, if T	4. Transaction		6. D and	5. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number or Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Owners Form of Derivati Security Direct (or Indire	Ownersh (Instr. 4)		
					Code V	(A) (D)	Date Exer	e rcisable	Expiration Date	on Titl	Amount or e Number of Shares						
Repor	ting O	wners															
					Daladi												
Reporting Owner Name / Address			100/ 0	Relationships													
Sobieski Jeff 20800 SWENSON DR. SUITE 175 WAUKESHA, WI 53186			Director 75	10% Own		Technolo	gy O	officer	Other								

Explanation of Responses:

Signatures

/s/ Jeffrey J. Sobieski

Signature of Reporting Person

- * 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) Represents purchase by the reporting person on the open market per Rule 10b-5-1.

01/22/2015

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.