FORM 4

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

OMB APPROVAL
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 Type	e Response	s)															
Name and Address of Reporting Person * Cleal Dorothy				2. Issuer Name and Ticker or Trading Symbol TELKONET INC [TKO]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 20374 SENECA MEADOWS PARKWAY				3. Date of Earliest Transaction (Month/Day/Year) 09/13/2007							X Officer (give title below) Other (specify below) Chief Operating Officer						
(Street)					4. If Amendment, Date Original Filed(Month/Day/Year) 09/13/2007							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
GERMAN	NTOWN,	MD 20876											Form file	d by More than	One Reporting	Person	
(City)		(State)		(Zip)		7	`able l	- Non-	-Deriva	tive Se	ecurities	Acqui	red, Dispo	osed of, or l	Beneficially	Owned	
(Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, i. any (Month/Day/Year		if Co (In	Code (Instr. 8)		tion 4. Securities Acqu (A) or Disposed of (D) (Instr. 3, 4 and 5)		of	Beneficial	nt of Securities ally Owned Following I Transaction(s) and 4)		6. Ownership Form: Direct (D) or Indirect	Beneficial Ownership	
							(Code	V A	Amount (A) or (D) Price		Price			(I) (Instr. 4)	(msu. 4)	
Common	Stock par	value	09/13	3/2007				P	1	,000	A	\$ 1.7	3,000			D	
\$0.001	eport on a s	separate line fo	r each o	class of securi	ities bene	eficially (owned	F	Person contair	s who	respo this fo	nd to t	not requ		spond unle	ss	1474 (9-02)
\$0.001	eport on a s	separate line fo	r each o					F	Person contain he fori	s who ned in m disp	respo this foo	nd to t	not requ ntly valid	ired to res		ss	1474 (9-02)
\$0.001 Reminder: Ro	2.	3. Transaction	n 3	Table II - D (e 3A. Deemed	Derivative.g., puts	ve Securi	ities A varran	cquired	Person contain he form d, Disposions, co 6. Date	s who ned in m disp osed of onvertil	o respo this for clays a f, or Ben ble secu	nd to to trm are currenteficial rities)	not requently valid Ty Owned Ttle and	OMB conf	spond unle trol numbe	of 10.	11. Natu
1. Title of 2 Derivative C Security (Instr. 3)	2.	3. Transaction	n 3 E Year) a	Table II - D (e 3A. Deemed Execution Date	Derivative e.g., puts 4. te, if Tra	ve Securi	5. Num of	cquirectits, opti	Person contair he forn d, Dispe	s who ned in m disp osed of envertil Exercise	o respo this for plays a f, or Ben ble secu sable n Date	nd to to the current efficially rities) 7. Ti Amo Undo Secu	not requantly valid	OMB conf	spond unle trol numbe	of 10. Owners Form of Security Direct (or Indir	11. National of Indirection Benefic Owners (Instr. 4
1. Title of 2 Derivative C Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Transaction	n 3 E Year) a	Table II - D (e 3A. Deemed Execution Date	Derivatives.g., puts 4. de, if Tra Co Year) (In	ve Securi	5. Num of Derir Secu Acqu (A) c Disp of (I (Inst 4, an	cquirects, opti	Person contain he form d, Dispo ions, co 6. Date and Exp	s who ned in m disp osed of nevertil Exercisoration /Day/Y	o respo this for plays a f, or Ben ble secu sable n Date	nd to 1 rm are currer reficial rities) 7. Ti Amo Undo Secu (Inst 4)	e not requently valid ly Owned ttle and ount of erlying prities	8. Price of Derivative Security	9. Number Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners Form of Derivat Security Direct (or Indirects)	11. Natu of Indir Benefic Owners (Instr. 4

Reporting Owners

		Relationships					
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
20374	Dorothy SENECA MEADOWS PARKWAY MANTOWN, MD 20876			Chief Operating Officer			

Signatures

/s/ Dorothy E. Cleal	01/08/2008
**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).

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.