FORM 3

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL OMB 3235-Number: 0104 Estimated average burden hours per 0.5 response...

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)										
Name and Address of Reporting Person * MAHAFFEY JOSEPH D	Statem (Mont		-		3. Issuer Name and Ticker or Trading Symbol TELKONET INC [TKOI.OB]					
(Last) (First) (Middle) 10200 INNOVATION DRIVE, SUITE 300	09/01	72010		Person(s) to I	ip of Reporting ssuer all applicable)	Fil	5. If Amendment, Date Original Filed(Month/Day/Year)			
(Street) MILWAUKEE,, WI 53226					Officer (give Other (spec			y 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 Beneficially Owned								
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	rect (Instr. 5)				
Common Stock per value \$0.001			0		D					
not required t number.	respond t o respond	o the colle I unless th	ection ne for	n of information m displays a cu	contained i	n this for	ontrol			
(Instr. 4)	2. Date Exe	ate Exercisable Expiration Date		(e.g., puts, calls, the and Amount of rities Underlying vative Security (4)	4. Conversion or Exercise Price of	5. Owner Form o	rship of tive	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Exercisable	Expiration Date	Title	Amount or Numb of Shares	Derivative Security	Securit Direct or Indi (I) (Instr.	(D) rect			
Reporting Owners										

Reporting Owner Name / Address		Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
MAHAFFEY JOSEPH D 10200 INNOVATION DRIVE, SUITE 300 MILWAUKEE,, WI 53226	X						

Signatures

/s/ Joseph D. Mahaffey	09/22/2010
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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.