SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL											
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			01	Section 50(ii) of the	investment c	Company Act of 1940				
1. Name and Addre	1 0			ssuer Name and Tio				ationship of Reportir < all applicable)	ng Person(s) to I	ssuer
								Director	10% 0	Owner
(Last) C/O MITEK SY 8911 BALBOA			IIe) 3. Date of Earliest Transaction (Month/Day/Year) 02/23/2012					Officer (give title below)	Other (specify below)	
	TIVEIVOL 50	JIL D	4.1	f Amendment, Date	of Original Fil	ed (Month/Day/Year)		vidual or Joint/Grou	o Filing (Check A	Applicable
(Street) SAN DIEGO	CA	92123					Line)	Form filed by On Form filed by Mo Person	1 0	
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1. Title of Security (Instr. 3) 2. Transad Date			2. Transaction Date	2A. Deemed Execution Date,	3. Transaction	4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a		5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect

Beneficial Ownership (Instr. 4) (D) or Indirect (I) (Instr. 4) if any (Month/Day/Year) Beneficially Owned Following /lonth/Day/Year) Code (Instr. 8) Reported Transaction(s) (Instr. 3 and 4) (A) or (D) Code v Amount Price See 27,400⁽¹⁾ Common Stock 02/23/2012 \$10.9201 2,459,681 Ι Μ D Note⁽²⁾ See **Common Stock** 02/24/2012 184,177(1) D \$10.8717 2,275,504 Ι Μ Note⁽²⁾

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

			(0191) P	, .		,	,	optiono, (, anne eo				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)	iction Instr.	5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5	ative rities ired osed . 3, 4	Expiration Date (Month/Day/Year) d d		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
	nd Address of NTON JC	Reporting Person [*]) <u>HN M</u>													
	TEK SYSTE	(First) EMS, INC. ENUE SUITE B	(Middle)												
(Street) SAN DII	EGO	CA	92123												
(City)		(State)	(Zip)												
	nd Address of	Reporting Person [*]													
	TEK SYSTE	(First) EMS, INC. ENUE SUITE B	(Middle)												
(Street) SAN DII	EGO	CA	92123												

Explanation of Responses:

(State)

(City)

1. The sales reported on this Form 4 were made pursuant to a Rule 10b5-1 plan adopted by the reporting persons on December 22, 2011.

(Zip)

2. Comprised of 25,000 shares held directly by Mr. Thornton, 25,000 shares held directly by Mrs. Thornton and 2,225,504 shares held indirectly through the Thornton Family Trust of 1981. Mr. and Mrs.

Thornton have shared voting and investment control over all of the shares held directly by each of them and the shares held indirectly by their family trust.

/s/ Fred Hutton, by Power of 02/27/2012 Attorney for John M. Thornton /s/ Fred Hutton, by Power of 02/27/2012 Attorney for Sally B. Thornton Date

** Signature of Reporting Person

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

 * 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.