# 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

1 37															
1. Name and Address of Reporting Person * HAWES GEORGE T				2. Issuer Name and Ticker or Trading Symbol ORAGENICS INC [orni]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner					
(Last) (First) (Middle) 390 PLANDOME RD.				3. Date of Earliest Transaction (Month/Day/Year) 06/23/2010						Officer (give title below) Other (specify below)					
(Street) MANHASSET, NY 11030			4. If A	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  nired, Disposed of, or Beneficially Owned					
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqu					Acqui						
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Deemed ution Date, if ath/Day/Year)	Code (Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)		of	Beneficia	lly Owned F Transaction	y Owned Following ransaction(s)		7. Nature of Indirect Beneficial Ownership
						Code	V	Amount	(A) or (D)	Price	ce			or Indirect (I) (Instr. 4)	(Instr. 4)
common s	stock		06/23/2010			S		6,935	11)	\$ 0.42	11,110,0	35		)	
	Report on a	separate line f	or each class of sec	urities	beneficially o	wned direc	tly or								
Reminder: I	Report on a	separate line f	Table II -	Deriva	tive Securitie	es Acquire	Personta conta the fo	ons when in the constant of th	this for plays a f, or Ben	rm are curre reficial	e not req ently valid	d OMB cor	formation spond unlo	ss	EC 1474 (9- 02)
1. Title of Derivative	2. Conversion	3. Transaction	Table II -	Deriva (e.g., pu	tive Securitic uts, calls, war 4. Transaction Code (Instr. 8)	es Acquire	Persoconta the fo d, Dis ions, 6. Da and I (Mor	ons who	n this for plays a f, or Ben ible secu cisable on Date Year)	rm are curre reficial rities) 7. T Ame Und Secu (Ins: 4)	e not requently valid  Owned  itle and ount of	uired to re I OMB cor	spond unle atrol number	f 10. Ownersh Form of Derivati Security Direct (I or Indire	11. Nature of Indirect Beneficial Ownership (Instr. 4)

### **Reporting Owners**

Daniel Communication (Addison	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
HAWES GEORGE T 390 PLANDOME RD. MANHASSET, NY 11030		X				

### **Signatures**

George T. Hawes by Daniel H. Luciano as atty-in-fact	06/25/2010
**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.