FORM 4	4
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Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

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02)

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

(Fint of Type Respons	es)										
1. Name and Address of Sullivan Michael O	2. Issuer Name an ORAGENICS IN			ading Sym	ıbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
3000 BAYPORT D	3. Date of Earliest Transaction (Month/Day/Year) 10/23/2012						X Officer (give title below) Other (specify below) CFO, Secretary and Treasurer				
TAMPA, FL 33607	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				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)		(A) or Disposed of (D)		of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form:	7. Nature of Indirect Beneficial Ownership
				Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock		10/23/2012		А		83,500 (1)	А	\$ 0	83,500	D	
Common Stock 10/23/2012			F		26,261 (<u>2)</u>	D	\$ 2.1	57,239	D		

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

Persons who respond to the collection of information SEC 1474 (9contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.	Numb	er 6.	Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n of		an	nd Expiration	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	De	erivati	ve (N	Aonth/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Se	curitie	es			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				A	cquired	d			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				(A	.) or				4)			Following	Direct (D)	
					Di	sposed	d						Reported	or Indirect	
					of	(D)							Transaction(s)	(I)	
					(Ir	nstr. 3,							(Instr. 4)	(Instr. 4)	
					4,	and 5))								
											Amount				
							D.	ate	Emination		or				
								xercisable	Expiration Date	Title	Number				
							EX	xercisable	Date		of				
				Code V	(/	A) (E))				Shares				

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Sullivan Michael O'Keefe 3000 BAYPORT DR. SUITE 685 TAMPA, FL 33607			CFO, Secretary and Treasurer						

Signatures

/s/ Mark A. Catchur, as Attorney-in-Fact for Michael O. Sullivan	10/25/2012
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).

(1) Represents discretionary share bonus award made under the Company's 2012 Equity Incentive Plan. The shares vested immediately.

(2) Represents withholding of shares of common stock to satisfy tax withholding obligations in connection with the discretionary share bonus award.

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.