SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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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. Name and Address of Reporting Person [*] <u>Goyal Anil K.</u>	2. Date of Event Requiring Statement (Month/Day/Year) 12/16/2013	3. Issuer Name and Ticker or Trading Symbol HEAT BIOLOGICS, INC. [HTBX]				
(Last) (First) (Middle)		(Check all applicable) (Month/Day/Year)	5. If Amendment, Date of Original Filed (Month/Day/Year)			
C/O 100 EUROPA DRIVE		X Officer (give title Other (specify Applicable Line)	nt/Group Filing (Check by One Reporting Person			
(Street) CHAPEL HILL NC 27517		VP of Business Development	by More than One Reporting			
(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)	4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Table II. Derivative Securities Baneficially Owned							

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		or Exercise	Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Indirect (I) Derivative (Instr. 5) Security	.,	
Stock Options	12/16/2013	12/15/2023	Common Stock	40,000(1)	7.58	D	

Explanation of Responses:

1. These options are exercisable over a ten year period, vesting pro rata on a monthly basis over a 4-year period.

/s/ Anil K. Goyal, Ph.D.

** Signature of Reporting Person

<u>12/19/2013</u> Date

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 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.

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.

OMB APPROVAL