BLACK JOANNA S

Form 4

February 07, 2005

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number:

OMB APPROVAL

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations

may continue. See Instruction

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * **BLACK JOANNA S**

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

XCYTE THERAPIES INC [XCYT]

(Check all applicable)

(Last)

(First)

3. Date of Earliest Transaction

10% Owner X_ Officer (give title Other (specify

(Month/Day/Year) 02/03/2005

1124 COLUMBIA STREET, SUITE 130

below)

VP and General Counsel, Secret

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

(Instr. 8)

Applicable Line)

Director

X Form filed by One Reporting Person

6. Individual or Joint/Group Filing(Check

Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Owned

SEATTLE, WA 98104

Person

1. Title of Security (Instr. 3)

(City)

(Month/Day/Year)

(State)

2. Transaction Date 2A. Deemed Execution Date, if

(Month/Day/Year)

(Zip)

(Middle)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D)

5. Amount of Securities Beneficially

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (T)

(Instr. 4)

(9-02)

(Instr. 4)

Following Reported Transaction(s) (Instr. 3 and 4)

(A)

Code V Amount (D) Price

(Instr. 3, 4 and 5)

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

Persons who respond to the collection of SEC 1474 information contained 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 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security

Conversion or Exercise

3. Transaction Date 3A. Deemed

(Month/Day/Year) Execution Date, if any

4. 5. Number of **Transaction**Derivative Code Securities

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount of **Underlying Securities** (Instr. 3 and 4)

Edgar Filing: BLACK JOANNA S - Form 4

(Instr. 3) Price of (Month/Day/Year) (Instr. 8) Acquired (A) Derivative or Disposed of Security (D) (Instr. 3, 4, and 5) Code V (A) (D) Date Expiration Title Exercisable Date

Employee Stock

Option
(Right to

\$ 2.29 02/03/2005

A 12,500

(2) 02

02/03/2015 Common

n 12,500

Amount

or Number of Shares

(Right to Buy) (1)

Reporting Owners

Reporting Owner Name / Address Relationships

Date

Director 10% Owner Officer Other

BLACK JOANNA S 1124 COLUMBIA STREET, SUITE 130 SEATTLE, WA 98104

VP and General Counsel, Secret

Signatures

By: Kathi Cordova, under POA 02/07/2005

**Signature of Reporting Person

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).
- Option grant is granted under the Company's 2003 Stock Plan which was amended by the Board of Directors on January 28, 2005 but is still subject to stockholders' approval at the Company's next annual stockholders' meeting.
- On February 3, 2005, this reporting person was granted an Option to purchase shares of Common Stock. This Option vests and becomes exercisable based on the satisfaction of certain company milestones as determined by the Board of Directors of Xcyte Therapies, except that in any event, 100% of the unvested Option shall vest upon the date that is the four-year anniversary of the vesting commencement date of such Option.

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.

Reporting Owners 2