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ANTIGENICS INC /DE/ Form 4/A April 06, 2010									
FORM 4 UNITED						-	PPROVAL		
CURIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							3235-0287		
Check this box if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated	Estimated average burden hours per		
abligations	a) of the Public U 30(h) of the In	Itility Hol	ding Co	mpany Act	of 1935 or Secti		. 0.5		
(Print or Type Responses)									
1. Name and Address of Reporting DECHAENE TOM	Symbol	er Name and GENICS II		-	Issuer	of Reporting Per eck all applicabl			
			Date of Earliest Transaction onth/Day/Year) /22/2010			X_ Director 10% Owner Officer (give title Other (specify below) below)			
(Street)	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year) 03/24/2010			al	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
NEW YORK, NY 10010					Form filed by Person	More than One R	eporting		
(City) (State)	(Zip) Tab	ole I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	Disposed	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
		Code V	Amount		(Instr. 3 and 4)				
Reminder: Report on a separate line	for each class of sec	urities benef	-	-	or indirectly.	ection of	SEC 1474		

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security	(Month/I	Day/Year)	(Instr.	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option, right to buy	\$ 14	03/22/2010		E			17,200	03/21/2000	03/22/2010	Common Stock	17,200

Reporting Owners

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
DECHAENE TOM C/O ANTIGENICS INC. 162 FIFTH AVENUE, SUITE 900 NEW YORK, NY 10010	Х			
Signatures				
Christine M. Klaskin, by Power of Attorney		04/06/20	010	
**Signature of Reporting Person		Date		
Explanation of Resp	onse	S:		

* 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.