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ANTIGENI	CS INC /DE/									
Form 4										
January 08,	2007									
FORM	ΛΔ								PPROVAL	
	UNITED	STATES		RITIES A shington			COMMISSION	N OMB Number:	3235-0287	
Check t	nger		Expires:	January 31,						
subject Section	if no longer subject to Section 16. SECURITIES							Estimated burden hou	irs per	
Form 4 orresponseForm 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,obligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or Sectionmay continue.30(h) of the Investment Company Act of 19401(b).1000000000000000000000000000000000000										
(Print or Type	Responses)									
1. Name and Address of Reporting Person * Wentworth Kerry2. Issuer Name and Symbol					d Ticker or	Trading	5. Relationship o Issuer	of Reporting Person(s) to		
Al				GENICS I		[AGEN]	(Check all applicable)			
(1			3. Date of Earliest Transaction (Month/Day/Year) 01/05/2007				Director 10% Owner Officer (give title Other (specify below) below) below) VP, Reg Affairs & Clinical Ops			
	(Street)		4. If Am	endment, D	ate Origina	ıl	6. Individual or Joint/Group Filing(Check			
			Filed(Mo	onth/Day/Yea	r)		Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
							Person			
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)			3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)		(A) or of (D)	Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D) Price	Transaction(s) (Instr. 3 and 4)			
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned directly o	or indirectly.			
					Perso		pond to the colle	ection of S	SEC 1474	

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 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	8.1
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	De
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Sec

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)			Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(]			(In	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock (1)	\$ 0	01/05/2007		А		15,813		<u>(1)</u>	<u>(1)</u>	Common Stock	15,813	

Reporting Owners

Reporting Owner Name / Address	Relationships					
FB	Director	10% Owner	Officer	Other		
Wentworth Kerry C/O ANTIGENICS INC. 630 FIFTH AVENUE, SUITE 2100 NEW YORK, NY 10111			VP, Reg Affairs & Clinical Ops			
Signatures						
Christine M. Klaskin, by Power of Attorney		01/08/20	07			

<u></u>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) Restricted Stock granted in accordance with the terms of the Antigenics Inc. 1999 Equity Incentive Plan, as amended, and vests equally over 2 years beginning January 5, 2007.

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.