

ANTIGENICS INC /DE/
Form 3
October 05, 2006

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL
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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Sharp Shalini		(Month/Day/Year)	ANTIGENICS INC /DE/ [AGEN]	
(Last)	(First)	(Middle)	10/01/2006	
C/O ANTIGENICS INC.,Â 630 FIFTH AVE., SUITE 2100			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
NEW YORK,Â NYÂ 10111			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line)
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Form filed by One Reporting Person
			(give title below) (specify below)	<input type="checkbox"/> Form filed by More than One Reporting Person
			CFO	

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)
Common Stock	2,500 ⁽¹⁾	D	Â
Common Stock	9,579	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

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 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)	4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	
Stock Option, right to buy	08/05/2004 ⁽²⁾	08/05/2013	Common Stock	20,000	\$ 12.45	D	Â
Stock Option, right to buy	02/18/2005 ⁽³⁾	02/18/2014	Common Stock	6,800	\$ 10.36	D	Â
Stock Option, right to buy	01/10/2006 ⁽⁴⁾	01/10/2015	Common Stock	20,000	\$ 9.43	D	Â
Stock Option, right to buy	03/22/2007 ⁽⁵⁾	03/22/2016	Common Stock	20,000	\$ 5.13	D	Â
Stock Option, right to buy	09/13/2007 ⁽⁶⁾	09/13/2016	Common Stock	60,000	\$ 1.74	D	Â
Stock Option, right to buy	09/15/2007 ⁽⁷⁾	09/15/2016	Common Stock	22,267	\$ 1.63	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Sharp Shalini C/O ANTIGENICS INC. 630 FIFTH AVE., SUITE 2100 NEW YORK, NY 10111	Â	Â	Â CFO	Â

Signatures

Christine M. Klaskin, by Power of Attorney
10/05/2006

__Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) Shares vest in two installments, 33% on 3/22/2007 and 67% on 3/22/2008.
- (2) Options vest in five equal annual installments beginning 08/05/2004.
- (3) Options vest in four equal annual installments beginning 02/18/2005.
- (4) Options vest in four equal annual installments beginning 1/10/2006.
- (5) Options vest in three equal annual installments beginning 3/22/2007.
- (6) Options vest in four equal annual installments beginning 9/13/2007.
- (7) Options vest in two installments, 33% on 9/15/2007 and 67% on 9/15/2008.

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.