Wentworth Kerry Form 4 January 28, 2010

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

Check this box subject to

if no longer Section 16. Form 4 or

Form 5 obligations may continue. See Instruction 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(b).

(Last)

(City)

1. Title of

Security

(Instr. 3)

1. Name and Address of Reporting Person * Wentworth Kerry

> (First) (Middle)

C/O ANTIGENICS INC., 162

FIFTH AVENUE. SUITE 900

(Street)

(State)

(Month/Day/Year)

NEW YORK, NY 10010

(Zip)

2. Issuer Name and Ticker or Trading Symbol ANTIGENICS INC /DE/ [AGEN]

3. Date of Earliest Transaction

(Month/Day/Year) 01/26/2010

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

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

Director 10% Owner X_ Officer (give title Other (specify below)

6. Individual or Joint/Group Filing(Check

VP, Clin, Reg & Quality

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

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

2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of 6. Ownership 7. Nature of Execution Date, if TransactionAcquired (A) or Securities Form: Direct Indirect Code Disposed of (D) Beneficially (D) or Indirect Beneficial (Instr. 3, 4 and 5) Ownership (Month/Day/Year) (Instr. 8) Owned (I) Following (Instr. 4) (Instr. 4)

> Reported (A) Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

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 (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 3. Transaction Date 3A. Deemed 4. 5. Number of 6. Date Exercisable and 7. Title and Amou Derivative Conversion (Month/Day/Year) Execution Date, if **Transaction**Derivative **Expiration Date** Underlying Securi Security or Exercise any Code Securities (Month/Day/Year) (Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo Num Shar
Stock Option, right to buy	\$ 0.75	01/26/2010		A	150,000		04/26/2010(1)	01/26/2020	Common Stock	150
Restricted Stock	<u>(2)</u>	01/26/2010		A	50,000		04/26/2010(2)	(2)	Common Stock	50

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Wentworth Kerry C/O ANTIGENICS INC. 162 FIFTH AVENUE, SUITE 900 NEW YORK, NY 10010

VP, Clin, Reg & Quality

Signatures

by Christine M. Klaskin, by Power of Attorney 01/28/2010

**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).
- Options granted in accordance with the Antigenics Inc. 2009 Equity Incentive Plan and vest quarterly over three years beginning April 26, 2010.
- (2) Restricted stock granted in accordance with the Antigenics Inc. 2009 Equity Incentive Plan and vests quarterly over three years beginning on April 26, 2010.

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.

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