

XCYTE THERAPIES INC

Form 3/A

December 21, 2004

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 *
Â HIGHBRIDGE CAPITAL
CORP

(Last) (First) (Middle)

THE CAYMAN CORPORATE
CENTRE, 4TH FLOOR,Â 27
HOSPITAL ROAD, GEORGE
TOWN

(Street)

GRAND CAYMAN,Â E9Â

(City) (State) (Zip)

2. Date of Event Requiring Statement
(Month/Day/Year)
10/29/2004

3. Issuer Name **and** Ticker or Trading Symbol
XCYTE THERAPIES INC [XCYT]

4. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

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

5. If Amendment, Date Original Filed(Month/Day/Year)
11/08/2004

6. Individual or Joint/Group Filing(Check Applicable Line)
____ Form filed by One Reporting Person
X Form filed by More than One Reporting Person

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)

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)
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Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
HIGHBRIDGE CAPITAL CORP THE CAYMAN CORPORATE CENTRE, 4TH FLOOR 27 HOSPITAL ROAD, GEORGE TOWN GRAND CAYMAN, E9	^	^ X	^	^
HIGHBRIDGE CAPITAL MANAGEMENT LLC 9 WEST 57TH STREET 27TH FLOOR NEW YORK, NY 10019	^	^ X	^	^
Dubin Glenn C/O HIGHBRIDGE CAPITAL MANAGEMENT, LLC 9 WEST 57TH STREET, 27TH FLOOR NEW YORK, NY 10019	^	^ X	^	^
Swieca Henry C/O HIGHBRIDGE CAPITAL MANAGEMENT, LLC 9 WEST 57TH STREET, 27TH FLOOR NEW YORK, NY 10019	^	^ X	^	^
Highbridge International LLC THE CAYMAN CORPORATE CENTRE, 4TH FLOOR 27 HOSPITAL ROAD GEORGE TOWN, GRAND CAYMAN, E9	^	^ X	^	^

Signatures

Highbridge Capital Corporation, By: /s/ Howard Feitelbert, Controller	12/21/2004
__Signature of Reporting Person	Date
Highbridge International LLC, By: /s/ Howard Feitelberg, Director	12/21/2004
__Signature of Reporting Person	Date
Highbridge Capital Management, LLC, By: /s/ Ronald S. Resnick, Managing Director	12/21/2004
__Signature of Reporting Person	Date
By: /s/ Glenn Dubin	12/21/2004
__Signature of Reporting Person	Date
By: /s/ Henry Swieca	12/21/2004
__Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- * 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).

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Remarks:

ThisÂ amendmentÂ toÂ theÂ FormÂ 3Â filedÂ onÂ NovemberÂ 8,Â 2004Â isÂ beingÂ filedÂ becauseÂ certainÂ ofÂ theÂ notÂ haveÂ CCCÂ andÂ CIKÂ numbersÂ atÂ theÂ timeÂ ofÂ suchÂ filing.Â Note,Â however,Â thatÂ asÂ aÂ resultÂ ofÂ Xcyte'sÂ outstandingÂ CommonÂ Stock,Â theÂ ReportingÂ PersonsÂ areÂ noÂ longerÂ 10%Â ownersÂ subjectÂ toÂ Sect ExchangeÂ ActÂ ofÂ 1934,Â asÂ amended.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.

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