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XCYTE THERAPIES INC

Form 3/A

December 21, 2004

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

OMB APPROVAL

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30(h) of the Investment Company Act of 1940

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

SECURITIES

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting

Person *

À HIGHBRIDGE CAPITAL **CORP**

(Last)

(First)

(Middle)

(Month/Day/Year) 10/29/2004

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

XCYTE THERAPIES INC [XCYT]

THE CAYMAN CORPORATE

CENTRE, 4TH FLOOR, Â 27 HOSPITAL ROAD, GEORGE

TOWN

(Street)

Statement

4. Relationship of Reporting

Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

11/08/2004

(Check all applicable)

Director __X__ 10% Owner Officer Other

(give title below) (specify below)

6. Individual or Joint/Group

Filing(Check Applicable Line) Form filed by One Reporting

Person

X Form filed by More than One

Reporting Person

GRAND CAYMAN. E9Â

(City) (State)

1. Title of Security (Instr. 4)

(Zip)

2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership

(I) (Instr. 5)

Form:

Table I - Non-Derivative Securities Beneficially Owned

Direct (D) or Indirect

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)

Conversion or Exercise Price of

5. Ownership Form of Derivative

6. Nature of Indirect Beneficial Ownership

(Instr. 5)

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Date Expiration Title Amount or Derivative Security:

Exercisable Date Number of Security Direct (D)

Shares or Indirect

(I)

(Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships			
		10% Owner	Officer	Other	
HIGHBRIDGE CAPITAL CORP THE CAYMAN CORPORATE CENTRE, 4TH FLOOR 27 HOSPITAL ROAD, GEORGE TOWN GRAND CAYMAN, E9Â	Â	ÂX	Â	Â	
HIGHBRIDGE CAPITAL MANAGEMENT LLC 9 WEST 57TH STREET 27TH FLOOR NEW YORK, NY 10019	Â	ÂX	Â	Â	
Dubin Glenn C/O HIGHBRIDGE CAPITAL MANAGEMENT, LLC 9 WEST 57TH STREET, 27TH FLOOR NEW YORK, NY 10019	Â	ÂX	Â	Â	
Swieca Henry C/O HIGHBRIDGE CAPITAL MANAGEMENT, LLC 9 WEST 57TH STREET, 27TH FLOOR NEW YORK, NY 10019	Â	ÂΧ	Â	Â	
Highbridge International LLC THE CAYMAN CORPORATE CENTRE, 4TH FLOOR 27 HOSPITAL ROAD GEORGE TOWN, GRAND CAYMAN, E9Â	Â	ÂX	Â	Â	

Signatures

Highbridge Capital Corpora	tion, By: /s/ Howard Feitelbert, Controller	12/21/2004
	**Signature of Reporting Person	Date
Highbridge International LLC, By: /s/ Howard Feitelberg, Director		
	**Signature of Reporting Person	Date
Highbridge Capital Manage Director	ement, LLC, By: /s/ Ronald S. Resnick, Managing	12/21/2004
	**Signature of Reporting Person	Date
By: /s/ Glenn Dubin		12/21/2004
By: /s/ Glenn Dubin	**Signature of Reporting Person	12/21/2004 Date
By: /s/ Glenn Dubin By: /s/ Henry Swieca	**Signature of Reporting Person	
	**Signature of Reporting Person **Signature of Reporting Person	Date

Reporting Owners 2

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:

This amendment to the Form 3 filed on November 8, 2004 is being filed because certain of the not have CCC and CIK numbers at the time of such filing. Note, however, that as a result of Xcyte's outstanding Common Stock, the Reporting Persons are no longer 10% owners subject to Sect Exchange Act of 1934, as amended.

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.