FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

OMB APPROVAL OMB Number:

Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* KYLE FREDERICK W | | | | | AVAN] | | | | | | | | | | x Directo | | | g Person(s) to Issu 10% Owr Other (sp | |
|---|--|--|---|----------------------------------|--|--|--|--|--|------------------------|--|--------------------------------------|---|----------------------------------|---|---|--|--|---|
| , | , , | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/13/2004 | | | | | | | | | | below) | | t | elow) | |
| (Street) PHILADELPHIA PA 19103 | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | Persor | n | | | |
| | Tab | le I - Noi | า-Deriv | ative | Se | curit | ies Ad | cquir | ed, C | Disp | osed c | of, or | Ben | eficial | ly Owned | d | | | |
| , (| | | | | ar) l | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Co | Transaction Code (Instr. | | | | | | Securiti Benefici Owned | 5. Amount of Securities Beneficially Owned Following | | ect rect) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | ode | v | Amount | 0 | A) or D) Price | | Transaction(s) (Instr. 3 and 4) | | | | Instr. 4) |
| Common Stock | | | | 05/13/2004 | | | | | | | 2,500 | | A | \$1.70 |)5 9, | 500 | D | | |
| Common Stock | | | | 05/13/2004 | | | | | | | 2,500 | | D | \$2.7 | 4 7, | 000 | D | | |
| Common Stock | | | | 05/13/2004 | | | | | М | | 4,900 | | A | \$1.705 | | ,900 | D | | |
| Common Stock 0 | | | | 05/13/2004 | | | | | S | | 4,900 | | D | \$2.7 | 3 7, | 000 | D | _ | |
| Common Stock 05/1 | | | | 3/2004 | | | | 1 | М | | 2,600 | | A | \$1.70 |)5 9, | 9,600 | | _ | |
| Common Stock 05/13/ | | | | 8/2004 | | | | | S | | 2,600 | | D | \$2.7 | 2 7, | 000 | D | | |
| | T | | | | | | | | | | | | | | Owned | | | | |
| 2. Conversion or Exercise Price of Derivative Security | Date Execution (Month/Day/Year) if any | | ed Date, | 4. Transac Code (I | ransaction ode (Instr. | | umber vative urities uired or posed O) tr. 3, 4 | 6. Dat | te Exer | rcisa Date | r) 7. Ti Amo Sec Und Deri | | Title and Amount of Securities Inderlying Derivative Security | | 8. Price of Derivative Security (Instr. 5) | derivative Securities Beneficial Owned Following Reported | Ownersh Form: Direct (D or Indired (I) (Instr. | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exerc | cisable | | | Title | | or Number of | | | | | |
| \$1.705 | 05/13/2004 | | | С | | | 2,500 | 05/13 | 3/2004 | 0.5 | 5/22/2013 | | | 2,500 | \$2.74 | 43,000 |) | D | |
| \$1.705 | 05/13/2004 | | | С | | | 4,900 | 05/13 | 3/2004 | 0.5 | 5/22/2013 | | | 4,900 | \$2.73 | 38,100 |) | D | |
| \$1.705 | 05/13/2004 | | | С | | | 2,600 | 05/13 | 3/2004 | 0.5 | 5/22/2013 | | | 2,600 | \$2.72 | 35,500 |) | D | |
| | (FI TTENHOUS DELPHIA P. (SI Security (Inst Stock Stoc | FREDERICK W (First) TTENHOUSE SQUARE, A DELPHIA PA (State) Tab Security (Instr. 3) Stock S | FREDERICK W (First) (Middle) TTENHOUSE SQUARE, APT 15A DELPHIA PA 19103 (State) (Zip) Table I - Nor Security (Instr. 3) Stock | FREDERICK W (First) (Middle) | Code St.705 O5/13/2004 C C C C C St.705 O5/13/2004 C C C St.705 O5/13/2004 C C C St.705 O5/13/2004 C C C C C C C C C | Code V St.705 05/13/2004 C St.70 | AVANT IN | Code V C C C C C C C C C | Code North/Day/Year Stock Stoc | AVANT IMMUNOTHE AVAN | Code V Code V Code V Code V Code C C C C C C C C C | AVANT IMMUNOTHERAPEUT AVAN 3 | AVANT IMMUNOTHERA PEUTICS | AVANT IMMUNOTHERAPEUTICS INC | Columbia Columbia | Convertion Code Code | AVAN | AVANT MUNOTHERAPEUTICS INC Check all applicability Check all | AVAN AVAN |

Explanation of Responses:

Frederick W. Kyle

05/14/2004

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

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 Number.

 $^{^{\}ast}$ 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).