FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1	OMB APPROVA									
1	OMB Number	3235-02								

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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* FURLONG MICHAEL E					AV	2. Issuer Name and Ticker or Trading Symbol AVANT IMMUNOTHERAPEUTICS INC [AVAN]									Check all a Dir		g Person(s) to Is	
(Last) (First) (Middle) 10 CHESTNUT STREET					3. Date of Earliest Transaction (Month/Day/Year) 07/01/2004									X Officer (give title Other (specify below) Sr. Dir. Bus. Development				
(Street) WILMINGTON MA 01887 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										S. Individual or Joint/Group Filing (Check 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																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date		n Date,	Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			nd Secu Bend Own	nount of rities ficially ed Following orted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or D)	Price	Tran	saction(s) r. 3 and 4)		(Instr. 4)
Common Stock 07/01/2						2004		L		500		A	\$2.2	261	1,000	D		
		Та	ıble II - D								sed of, onvertib				y Owne	ł		
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			Transaction Code (Instr. 8)		n of Deriv Secu Acqu (A) o Disp of (D (Inst	of		6. Date Exercisable and Expiration Date Month/Day/Year)				str. 3 ount	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	of Sha	res					

Explanation of Responses:

Michael E. Furlong

07/02/2004

** Signature of Reporting Person

Date

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

- * 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).

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.