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

FORM D



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per form......1

SEC	USE ONLY
Prefix	Serial
DATE	RECEIVED

Name of Offering (check if this is an a	mendment and name has changed, a	nd indicate change.)			1038	355
Series E Preferred Stock Financing			*		1 - 0	200
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	▼ Rule	506	Section 4(6)	ULOE
Type of Filing:		New Filing		×	Amendment	
	A. BASIC II	DENTIFICATION DA	ATA			
1. Enter the information requested about	it the issuer					
Name of Issuer (check if this is an ame	endment and name has changed, and	indicate change.)				
Genitope Corporation						
Address of Executive Offices	(Number and Street,	City, State, Zip Code)	Telephon	e Number (I	ncluding Area Code)	
525 Penobscot Drive, Redwood City, CA	94063		(650) 47	2-2000		
Address of Principal Business Operations	(Number and Street, City, State, Zip	Code)	Telephon	e Number (I	ncluding Area Code)	PROCESSE
(if different from Executive Offices)						
			<u> </u>			THAY A GOOD
Brief Description of Business	•					MAI O 2 TOOS
Development of cancer immunotherapy pr	roducts.					
Type of Business Organization					MEDELVE	FINANCIAL
	☐ limited partnership, already for	med			other (please specify	
☐ business trust	☐ limited partnership, to be forme	ed		(A	1AY 0 3 2002	
]	Month 1	Year	N. S.		. /
Actual or Estimated Date of Incorporation	or Organization:	4	96			
Tunindiation of Incomposition or Occasion	ion: (Enter two-letter U.S. Postal	Comice abbreviation f	or Ctata	ĭ x l∢	Actual Manager	3 Estimated
Jurisdiction of Incorporation or Organizat	CN for Canada: FN for other		or state:		11. 11	DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer,
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	🗷 Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
	name first, if individual)				
	idence Address (Number and	Street City State Zin Code)		<u>- </u>	***
	rporation, 525 Penobscot Driv				
Check Box(es) that	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Apply:	C + 'C' T' T T	·			
Full Name (Last Kurland, Fred	name first, if individual)				
Business or Res	idence Address (Number and S	Street, City, State, Zip Code)			
c/o Genitope Co	rporation, 525 Penobscot Driv	e, Redwood City, CA 94063	·		
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last Ennis, Greg	name first, if individual)				
Business or Res	idence Address (Number and S	Street, City, State, Zip Code) Road, Building 3, Suite 125, M	Ianlo Park CA 94025		
Check Boxes	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or
that Apply:	LI Promoter	☐ Beneficial Owner	LI Executive Officer	E Director	Managing Partner
Full Name (Last Simon, Nicholas	name first, if individual)				
	idence Address (Number and S	Street City State Zin Code)	·	<u> </u>	
	·	0, South San Francisco, CA 940	080	·	
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	▼ Director	☐ General and/or Managing Partner
Full Name (Last Hasler, William	name first, if individual)				
	idence Address (Number and Sporation, 100 Bush Street, Suit	Street, City, State, Zip Code) te 820, San Francisco, CA 9410	4		
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last Denney, Gordon	name first, if individual)				
	idence Address (Number and S	Street, City, State, Zip Code)			<u> </u>
	oad, Nashville, TN 37215				
Check Boxes that Apply:	Promoter	🗷 Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
	name first, if individual) e & Partners Ltd. and related e	ntities			
	idence Address (Number and S			<u> </u>	
		g 3, Suite 125, Menlo Park, CA	94025		
Check Box(es) that	Promoter	🗷 Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Apply:				 	
•	t name first, if individual) aford C. and related entities				
	idence Address (Number and	Street, City, State, Zin Code)		<u> </u>	
	oad, Suite 400, Dallas, TX 752				

					В.	INFORMA'	TION ABO	UT OFFEI	RING				
1.	Has the issuer s	sold, or doe	es the issuer i			ccredited inv		_		E.	Ү	es No	<u>x</u>
2.	What is the min	nimum inve	estment that	will be acce	pted from	any individu	al?	•••••				\$	n/a
3.	Does the offerin	ng permit j	oint ownersh	up of a sing	le unit?						Y	es <u>x</u> No	-
4.	Enter the infor	mation rea	quested for	each nercon	who has	heen or wi	ll be paid (or aiven di	rectly or in	ndirectly, any co			
	solicitation of p	purchasers the SEC at	in connectind/or with a	on with sale state or state	es of secur es, list the	rities in the name of the	offering. It broker or de	f a person t	o be listed	is an associated (5) persons to be	person or a	gent of a bro	oker or dealer
						- ,							
Full	Name (Last nam	ne first, if i	ndividual)						•				
Busi	ness or Residence	ce Address	(Number an	nd Street, Cir	ty, State, Z	ip Code)	·		<u> </u>				
	Bancorp Piper		-		-	•							
Nam	e of Associated	Broker or	Dealer				 		İ				
State	s in Which Pers	on Listed l	Has Solicited	d or Intends	to Solicit F	urchasers							
(Che	ck "All States" (or check in	idividual Sta	tes)									🗆 All States
[AL]	[AK	_		[AR]	[CA]XX	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IN]	-		[KS]	[KY]	[LA]XX	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[TM]	-	-		[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC] Name (Last nam			[TN]XX	[TX]XX	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
1 411	Turne (Lact nin.	uc 1115t, 11 1	ndi vidaai)						İ				
Busin	ness or Residence	ce Address	(Number an	d Street, Ci	ty, State, Z	ip Code)		<u> </u>					
Ston	egate Securitie	s, Inc., 595	50 Sherry L	ane, Suite 4	10, Dallas	s, TX 75225						<u> </u>	
Nam	e of Associated	Broker or	Dealer								`		
State	s in Which Pers	on Listed l	Has Solicited	or Intends	to Solicit F	urchasers							
(Che	ck "All States" (or check in	ndividual Sta	ites)									🗆 All States
[AL]	[AK	K]	[AZ]	[AR]	[CA]XX	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[D]
[IL]	[IN]	J .	[IA]	[KS]	[KY]	[LA]XX	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE			[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	OZ]		[SD]	[TN]XX	[TX]XX	[UT]	[VT]	[VA]	[VA]	[WV]	[W1]	[WY]	[PR]
run	Name (Last nam	ne mist, m i	ncividuai)										
Busi	ness or Residence	ce Address	(Number an	nd Street, Cit	ty, State, Z	ip Code)							
Nam	e of Associated	Broker or	Dealer										
		- , ; - , .			0 11 1. 7	<u> </u>					_		
	s in Which Pers												🗆 All States
(Che	ck "All States" ([Ak			•	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	Li Ali States
[AL]	[IN]			[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[FL] [MI]	[MN]	[MS]	[MO]
[MT]				[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]			[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Type of Security		Aggregate		Aı	mount Already
		1	Offering Price			Sold
	Debt	\$	4,280,009		\$	4,280,009
	Equity	\$	22,920,639		\$	22,920,639
	Common Preferred	-				
	Convertible Securities (including warrants)	s	1,284,002		\$	1,284,002
	Partnership Interests	İ				
	Other (Specify)					
	Total		28,484,650			28,484,650
	Answer also in Appendix, Column 3, if filing under ULOE.	-				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number			Aggregate
			Investors			ollar Amount of Purchases
	Accredited Investors		121		\$	28,484,650
	Non-accredited Investors	_	0			0
	Total (for filings under Rule 504 only)	-			\$	
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.					
			Type of		D	Oollar Amount
			Security			Sold
	Type of Offering					
	Rule 505	_				
	Regulation A	-				
	Rule 504	-			s <u> </u>	
	Total				\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				\$	·
	Printing and Engraving Costs			Œ	\$	2,500
•		3		Œ	\$	75,000
	Legal Fees					
	Accounting Fees			2	\$	\$5,000
	Accounting Fees				\$ \$	
٠	Accounting Fees				\$ \$ \$	\$5,000 \$50,000 \$125,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	AND USE OF PROCEEDS	
 Enter the difference between the aggregate offering price given in response to Part C - Question 1 in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer" 		\$28,227,650
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for If the amount for any purpose is not known, furnish an estimate and check the box to the left of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Que	the estimate. The total of the uestion 4.b above.	·
	Payment to Officers, Directors, & Affiliates	Payment To Others
Salaries and fees		□ \$
Purchase of real estate		□ \$
Purchase, rental or leasing and installation of machinery and equipment		□ s
Construction or leasing of plant buildings and facilities		□ s
Acquisition of other businesses (including the value of securities involved in this offering that may be use		
in exchange for the assets or securities of another issuer pursuant to a merger)		□ \$
Working capital		\$
Other (specify):	— — ———————————————————————————————	x \$28,227,650
	s	□ s
		□ \$
Column Totals	—	□ \$
Total Payments Listed (column totals added)	·· 🗷 \$	28,227,650
D. FEDERAL SIGNATURE		
The issuer had duly caused this notice to be signed by the undersigned duly authorized person. If this noti	ice is filed under Rule 505, the	following signature constitutes
an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written requon-accredited investor pursuant to paragraph (b)(2) of Rule 502.		
Issuer (Print or Type) Signature		Date
Genitope Corporation	termon to	April 30, 2003
Name of Signer (Print or Type) Title of Signer (Print or Type)	ne)	
Dan W. Denney, Jr. Chairman and CEO	v	
·		

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1.	Is any party described in 17 CFR 230.262 presently subject to any of the disq	qualification provisions of such	rule?	Yes	No 🗷
٠	See Appendix, Colu	ımn 5, for state response.			
2.	The undersigned issuer hereby undertakes to furnish to the state administrate such times as required by state law.	tor of any state in which the r	otice is filed, a notice on Form I	(17 CFR 239.	500) at
3.	The undersigned issuer hereby undertakes to furnish to any state administrator	ors, upon written request, infor	mation furnished by the issuer to o	fferees.	
4.	The undersigned issuer represents that the issuer is familiar with the condi (ULOE) of the state in which this notice is filed and understands that the issue conditions have been satisfied.				
The pers	issuer has read this notification and knows the contents to be true and has on.	duly caused this notice to be	signed on its behalf by the under	signed duly aut	horized
Issu	er (Print or Type)	Signature		Date	
Gen	itope Corporation			April 30, 2003	3
Nan	ne (Print or Type)	Title (Print or Type)			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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FORM 2400

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