FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFIC	IAL OWNERSHIP

OMB APPRO	OVAL							
OMB Number:	3235-0287							
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* <u>Koenig Scott</u>					2. Issuer Name and Ticker or Trading Symbol MACROGENICS INC [MGNX]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) 9704 MEDICAL CENTER DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 01/03/2019								X Officer (give title Other (specify below) President and CEO							
(Street)	ILLE M	ID	20850		4. 1	4. If Amendment, Date			of Original Filed (Month/Day/Year)					ne) $old X$ Form fi	iled by C	oup Filing (Check App One Reporting Person More than One Report		rson	
(City)	(S		(Zip)										<u> </u>	Person					
			le I - No			_			<u> </u>	l, Dis	·			Illy Owned		l	1		
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Disposed Of			es Acquired Of (D) (Instr.	(A) or . 3, 4 and	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	(A) or (D)	Price	Transaction (Instr. 3 and				(1150. 4)		
Common	Stock			01/03	/2019				M		39,897	A	\$0.9 4	213,0	60	D			
Common Stock											703,4	703,413		[Owned jointly with reporting person's wife. By Scott				
Common Stock												167,7	167,782		[Koenig Family Irrevocable Trust			
		7	Table II								osed of, convertil			y Owned					
1. Title of 2. 3. Transaction 3A. Deemed Execution Date Conversion Date (Month/Day/Year) or Exercise (Month/Day/Year)		4. Transa	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		t 8. Price of Derivative Security	derivat Securit Benefic Owned Followi Reporte	urities eficially led owing orted saction(s) Form Director (I) (II							
					Code	v	(A)		Date Exercisa		Expiration Date	Title	Amoun or Number of Shares						
Employee stock option (right to buy)	\$0.94	01/03/2019			M ⁽¹⁾	M ⁽¹⁾		39,897	07/11/20	009	01/10/2019	Common Stock	39,89	7 \$0	0		D		

Explanation of Responses:

1. The transaction represents an exercise and hold of expiring options.

Remarks:

/s/ Lynn Cilinski, Attorney-in-

01/04/2019

** 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.