FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPRO\	/AL
OMB Number:	3235-0104
Estimated average burden	
hours per response:	0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Chladra Manager			2. Date of Event Requirin Statement (Month/Day/Y 01/03/2023		3. Issuer Name and Ticker or Trading Symbol MACROGENICS INC [MGNX]						
(Last) 9704 MEDICAL	(First)	(Middle)			4. Relations (Check all a	ship of Reporting Person(s) to Issapplicable)	ssuer		5. If Amendment, Date of	f Original Filed (Month/Day/Year)	
5704 MEDICIE GENTER DRIVE				X Director		10% Owner		-			
(Street)						Officer (give title below)	Other	er (specify b			up Filing (Check Applicable Line) One Reporting Person
ROCKVILLE	MD	20850								Form filed by M	More than One Reporting Person
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
			Table I - N	lon-Deriv	ative Sec	curities Beneficially Ow	ned		,		
1. Title of Security (I	nstr. 4)		Table I - N	2		of Securities Beneficially	3. Own	nership Fo (D) or Indi 5)		. Nature of Indirect Bend	eficial Ownership (Instr. 5)
1. Title of Security (li	nstr. 4)		Table II	2 O	. Amount of Dwned (Instr.	of Securities Beneficially	3. Own Direct ((Instr. 5	(D) or Indi 5)		. Nature of Indirect Bene	eficial Ownership (Instr. 5)
Title of Security (In Inc. 1. Title of Derivative	,		Table II	- Derivat calls, wan isable and	. Amount of Dwned (Instr. tive Secur rrants, op	of Securities Beneficially r. 4) urities Beneficially Owne ptions, convertible secu	3. Own Direct ((Instr. 5 ed arities)	(D) or Indi 5)		5. Ownership on Form: Direct (D)	eficial Ownership (Instr. 5) 6. Nature of Indirect Beneficial Ownership (Instr. 5)

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Lynn M. Cilinski, Attorney-in-fact 01/05/2023

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).

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

LIMITED POWER OF ATTORNEY FOR SECTION 16 REPORTING OBLIGATIONS

FOR SECTION 16 REPORTING OBLIGATIONS

Know all by these presents, that the undersigned hereby makes, constitutes and appoints each of James Karrels, Jeffrey Peters and Lynn Cilinsk:

(1) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of MacroGenics Inc. (the "Compan" (2) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to prepare, complete and execute (3) seek or obtain, as the undersigned's representative and on the undersigned's behalf, information regarding transactions in the Company's si (4) take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of being the undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with respective Nutrices where the undersigned has caused this Power of Attorney to be executed as of this 3rd day of January 2023.

//s/ Meenu Chhabra Karson

Signature

Signature

Meenu Chhabra Karson Name (print)