#### FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 235-0287 |
|----------|
|          |
| 0.5      |
|          |

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*  HURWITZ EDWARD                         |  |          |          |                                      |   | 2. Issuer Name and Ticker or Trading Symbol MACROGENICS INC [ MGNX ]                   |  |  |   |   |  |                   |                     |                    |   | k all app  | olicable)                | ing Pe   | erson(s) to I  | ssuer<br>Owner  |
|--|--|----------|----------|--------------------------------------|---|--|--|--|---|---|--|-------------------|---------------------|--------------------|---|--|--------------------------|--|--|---|
|  | CROGENI  | CS, INC. | Middle)  |                                      |   | 3. Date of Earliest Transaction (Month/Day/Year) 02/18/2014                            |  |  |   |   |  |                   |                     |                    |   | Offic<br>belov   | er (give title<br>v)     |  |  | (specify<br>)   |
| 9640 MEDICAL CENTER DRIVE  |  |          |          |                                      |   | 4. If Amendment, Date of Original Filed (Month/Day/Year)                               |  |  |   |   |  |                   |                     |                    | 6. Individual or Joint/Group Filing (Check Applicable Line) |  |                          |  |  |   |
| (Street)   | ILLE M   | D 2      | 20850    |                                      | _ |  |  |  |   |   |  |                   |                     |                    | X   |  |                          |  |  |   |
| (City)   | (S   | tate) (  | Zip)     |                                      |   |  |  |  |   |   |  |                   |                     |                    |   |  |                          |  |  |   |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |  |          |          |                                      |   |  |  |  |   |   |  |                   |                     |                    |   |  |                          |  |  |   |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day                     |  |          |          |                                      |   | Execution Date   |  |  | 3.<br>Transaction<br>Code (Instr.<br>8) |   |  | es Ac<br>Of (D)   | quired<br>) (Instr. | (A) or<br>3, 4 and | and 5)   Securiti<br>Benefic                                |  | es<br>ially<br>Following | Form<br>(D) o  | n: Direct<br>or Indirect<br>ostr. 4)                   | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|  |  |          |          |                                      |   |  |  |  | Code                                    | v | Amount   | (A) or<br>(D) Pri |                     | Price              |   | Transaction(s)<br>(Instr. 3 and 4)   |                          |  |  | (1115411 4)   |
| Common Stock 02/18/2   |  |          |          |                                      |   | 2014   |  |  |   |   | 308,513 <sup>(</sup>   | (1)               | D                   | \$36.5             |   | 1,704,996  |                          |  | T I  | See<br>Footnote <sup>(2)</sup>                                    |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |          |          |                                      |   |  |  |  |   |   |  |                   |                     |                    |   |  |                          |  |  |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                              | ve Conversion Date Execution Date or Exercise (Month/Day/Year) if any  |          | on Date, | 4.<br>Transaction<br>Code (Instr. 8) |   | 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)  Date Expiration Date |   |   | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount of Numbe of Title Shares |                   | nstr. 3             | t<br>r             |   | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) |                          | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |   |

#### **Explanation of Responses:**

- 1. These securities were sold as follows: 282,573 by Alta BioPharma Partners III, L.P. ("ABP III"), 18,977 by Alta BioPharma Partners III LP GmbH ("ABP III KG") and 6,963 by Alta Embarcadero BioPharma Partners III, LLC ("AEBP III"). Edward Hurwitz is a director of Alta BioPharma Management Partners III, LLC, which is the general partner of ABP III, the managing limited partner of ABP III KG and the manager of AEBP III.
- 2. The shares are held as follows: 1,561,635 by ABPIII; 104,877 by ABPIII KG; and 38,484 by AEBP III. Edward Hurwitz disclaims beneficial ownership of these securities except to the extent of any pecuniary interest therein.

# Remarks:

/s/ Lynn Cilinski, attorney-in-

02/18/2014

fact

\*\* 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.