## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	DC	20549
wasiiiiqtoii,	D.C.	20049

STATEMENT (	OF CHANGE	S IN BENEFICIA	L OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response.								

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

Name and Address of Reporting Person*  Koenig Scott					2. Issuer Name <b>and</b> Ticker or Trading Symbol MACROGENICS INC MGNX						(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last)	(F	irst) ENTER DRIVE	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/08/2024								below)	10% Owner give title Other (specif below)  President and CEO			·
(Street) ROCKVILLE MD 20850 (City) (State) (Zip)				-	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	ndividual or Joint/Group Filing (Check Applicable a)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										satisfy								
1. Title of Security (Instr. 3)  2. Transa Date					nsactio				3. 4. Securities Acquired (A) of			ed (A) or	5. Amoun	s I	6. Owner Form: Di (D) or Inc	irect Ir	. Nature of ndirect	
(MORTH)				"Day"						Amount	(A) o	r Price	Owned For Reported Transacti	wned Following (i) (l		. 4) 0	Ownership Instr. 4)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\)	ate, T	4. Transactior Code (Instr 8)		saction Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio	y O Fo Oi (I)	0. wnership orm: irect (D) r Indirect ) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				C	Code	v	(A)	(D)	Date Exercisable		opiration	Title	Amount or Number of Shares		in(s)			
Employee Stock Option (right to buy)	\$18.3	02/08/2024			A		248,000		(1)	02	2/08/2034	Common Stock	248,000	\$0	248,000	)	D	
Restricted Stock Unit	(2)	02/08/2024			A		95,000		(3)		(3)	Common Stock	95,000	\$0	95,000		D	

## **Explanation of Responses:**

- 1. 12.5% of the shares underlying the grant became exercisable 6 months after the date of grant and an additional 6.25% of the shares underlying the grant became exercisable on the first day of each three-month
- 2. Each restricted stock unit (RSU) represents a contingent right to receive one share of the Issuer's common stock.
- 3. The RSUs will vest as to 33% of the total shares one year after the date of grant and 33% each year thereafter.

## Remarks:

/s/ Lynn M. Cilinski, Attorney-02/12/2024 in-fact

\*\* Signature of Reporting Person

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

- $^{\star}$  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.