FORM 4

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

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APP	APPROVAL							
	OMB Number:	3235-0287							
	Estimated average burden								
- 1	L	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

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1. Name and Address of Reporting Person*  Cilinski Lynn  (Last) (First) (Middle)  9704 MEDICAL CENTER DRIVE					2. I <u>M</u>	S. Issuer Name and Ticker or Trading Symbol MACROGENICS INC [ MGNX ]      3. Date of Earliest Transaction (Month/Day/Year) 02/08/2024								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
														below)	Officer (give title below)  VP, Controller	r and	Other (s below) Treasurer	`	
(Street) ROCKVILLE MD 20850				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(City) (State) (Zip)					Rı	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.													
		Tab	le I - No	n-Deri	vativ	e Se	curities	s Ac	quired, D	ispos	sed o	f, or Bei	neficiall	y Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Date,			Code (Instr.   5)					es Following (I)	Form (D) o	6. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
				Code V				Ar	mount	(A) or (D) Price		Transact	Reported Transaction(s) (Instr. 3 and 4)			(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. Deeme Execution if any (Month/Day	Date, T	4. Transa Code (l 8)				6. Date Exercisal Expiration Date (Month/Day/Year		e and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	e C s F lly C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Expir Date	ration	Title	Amount or Number of Shares						
Employee Stock Option (right to buy)	\$18.3	02/08/2024			A		45,000		(1)	02/08	8/2034	Common Stock	45,000	\$18.3	45,000	0	D		
Restricted Stock Unit	\$0 <sup>(2)</sup>	02/08/2024			Α		17,000		(3)	(	(3)	Common Stock	17,000	\$0	17,00	0	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 period thereafter.
- 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.

/s/ Lynn M. Cilinski, Attorneyin-fact

\*\* Signature of Reporting Person Date

02/12/2024

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.