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MACROGEN	ICS INC									
Form 4										
February 16, 2	2017							<u></u>		
FORM	4	CT A TEC	SECU	DITIES		CHANCE	E COMMISSIO	ΛT	PPROVAL	
	UNITED	SIAILS		shington				Number:	3235-0287	
Check this if no longer subject to Section 16. Form 4 or	F CHAN	NGES IN SECUI	Estimated burden hou	irs per						
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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								·	0.5	
(Print or Type Re	sponses)									
1. Name and Address of Reporting Person <u>*</u> Koenig Scott			2. Issuer Name and Ticker or Trading Symbol MACROGENICS INC [MGNX]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(Eirst)	Middle)	3. Date of Earliest Transaction				(Check all applicable)			
(Last) (First) (Middle) 9704 MEDICAL CENTER DRIVE			(Month/Day/Year) 02/15/2017			_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) President and CEO				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
ROCKVILLE	E, MD 20850						Person	where than one R	cporting	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
	. Transaction Date Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3,	(A) or of (D) 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Damindan Danar	t on o concrete line	for each al	and of and		Amount	(D) Price	on in dino othe			
Keminder: Kepor	t on a separate line	e for each cl	ass of sec	unues bene	-	-	or indirectly.	ction of	SEC 1474	
					inforr requi	nation con red to resp ays a curre	tained in this form ond unless the fo ntly valid OMB co	n are not rm	(9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired Disposed (Instr. 3, 4 5)	of (D)				
				Code V	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount o Number o Shares
Common Stock	\$ 20.53	02/15/2017		А	200,000)	<u>(1)</u>	02/15/2027	Common Stock	200,000

Reporting Owners

Attorney-in-Fact

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Koenig Scott 9704 MEDICAL CENTER DRIVE ROCKVILLE, MD 20850	Х		President and CEO				
Signatures							
/s/Lynn Cilinski,	02/16/2	2017					

Signature of Reporting Person **Explanation of Responses:

* 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).

Date

12.5% of the options become exercisable 6 months after the date of grant and the remaining 87.5% shall vest in 14 substantially equal (1) quarterly installments thereafter.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.