FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

vvasimigton,	D.O. 200-0	

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

0.5

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Wingrove Theresa				2. Issuer Name and Ticker or Trading Symbol IMMUNOGEN INC [IMGN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
wingro	ve There	<u>sa</u>		-		01100		<u> </u>	J. ()			Director		10% Ow		
,												X Officer (give title	Other (s below)	pecify	
(Last)	(F	First)	(Middle)				Trans	saction (Mont	n/Day/Year)			VP of Regulatory Affairs				
C/O IMN	MUNOGEN	I, INC.		ľ	01/31/2019							VP of Regulatory Affairs				
830 WIN	TER STRE	EET		L												
				4	. If Am	endment,	Date	of Original File	ed (Month/Da	y/Year)	6. Ir	ndividual or Jo	oint/Group Filin	(Check App	licable	
(Street)											Line	,				
WALTH	AM M	1A	02451									X Form fil	ed by One Rep	orting Person		
				_								Form fil Person	ed by More tha	n One Report	ing	
(City)	(0	State)	(Zip)									reisuii				
(City)	(3	olale)	(Zip)													
		Ta	ble I - Non-D	erivati	ive S	ecuritie	s Ac	cquired, D	isposed c	f, or Be	neficially	y Owned				
Date			e	E		2A. Deemed Execution Date, if any		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)		ed (A) or tr. 3, 4 and !	5. Amoun Securities Beneficial	Form:	n: Direct I	. Nature of ndirect Beneficial		
			I (MC	Month/Day/reary		(Month/Day/Yea			"			Owned Fo		str. 4) C	Ownership	
								Code V	Amount	(A) or (D)	r Price	Reported Transaction (Instr. 3 au		1	Instr. 4)	
			Table II - Dei	ivativ	<u> </u>	curitiae	Δ.c.	uired Dis	nosed of	or Bene	aficially	Owned				
								s, options				Owneu				
Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		3A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		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)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
											Amount		(Instr. 4)			
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	or Number of Shares					
Stock										Common						
Option (right to buy)	\$5.25	01/31/2019		A		126,100		01/31/2020 ⁽¹⁾	01/31/2029	Stock	126,100	\$5.25	126,100	D		

Explanation of Responses:

 $1. \ Exercisable \ in three \ equal \ installments \ over \ three \ years \ starting \ on \ the \ first \ year \ anniversary \ of \ the \ grant.$

/s/ Craig Barrows, attorney in

<u>fact</u>

** Signature of Reporting Person

Date

02/04/2019

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.