SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEMENT OF CHANGES					
	obligations may continue. See Instruction 1(b).	Filed pursuant to Section 16(a) of the					

TATEMENT 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

I												
	OMB Number:	3235-0287										
	Estimated average burden											
	hours per response:	0.5										

1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol IMMUNOGEN INC [IMGN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>SKALETSKY MARK B</u>					1	(,								2	C Directo	r		10% O	wner	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 11/11/2009									Officer below)	(give title		Other (below)	specify	
	22 PURITAN RUAD																			
					- 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)		IA	02461												K Form fi	led by On	e Repo	orting Perso	n	
	1N IV.		02401		_										Form fi Person		re thar	n One Repo	rting	
(City)	(S	tate)	(Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D							Execution if any	2A. Deemed Execution Date if any (Month/Day/Yea		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amour Securities Beneficia Owned Fe Reported	s Ily ollowing	Form (D) of	vnership 1: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										Code V		Amount	(A) or (D)	Price	Transacti (Instr. 3 a	on(s)			(1130. 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 I if any (Month/Day	Date,	4. Transaction Code (Instr. 8)				6. Date Exercisable Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownershi (Instr. 4)	
					Code		(A)	(D)	Dat	te ercisable		Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

\$<mark>0</mark>(1)

Deferred

Share Unit

1. The deferred share units were issued pursuant to the Issuer's Compensation Policy for Non-Employee Directors and are convertible into Common Stock on a one-to-one basis.

3,759

2. The vested deferred share units are to be settled 100% in shares of Common Stock of the Company upon the reporting person's retirement from the Board of Directors.

3. The deferred share units vest ratably over a one year period in quarterly increments beginning on February 1, 2010, contingent upon the individual remaining a director as of each vesting date.

02/01/2010⁽³⁾⁽²⁾

/s/ Craig Barrows, attorney in fact <u>11</u>

3,759

\$0⁽¹⁾

Common

Stock⁽²⁾

(2)

<u>11/12/2009</u> Date

3,759

D

** Signature of Reporting Person

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).

11/11/2009

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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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.