FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	IB APPROVAL

ı	OMB Number:	3235-0287
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ı	hours per response:	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

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)							
FOSTER DAVID G											J				Directo	r		10% Ov	· .			
(Last) (First) (Middle)							Date of Earliest Transaction (Month/Day/Year)									(give title		Other (s	specify			
` '	•	04/01/2019									V.P	Fin., Pri	n. Ac	cctg. Off.								
22 HILLSIDE DR.																		_				
							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)						and an analysis of the state of the st									Line)							
TOWNSEND MA 01469														7	X Form filed by One Reporting Person							
															Form filed by More than One Reporting							
(City) (State) (Zip)															Persor	l						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of	ction	<u> </u>							(A) or	5. Amoui	nt of 6. Ov		nership	7. Nature of								
Date (Month/Da							ay/Year) Execution Date if any (Month/Day/Yea							I Of (D) (Instr. 3, 4 and		Beneficially (D) of Owned Following (I) (II)		: Direct	Indirect Beneficial			
													3					nstr. 4)	Ownership (Instr. 4)			
									Code V Amount			(A) or Price		Reported Transaction(s)								
							Code V Amount (A) 01 (D)							Price	(Instr. 3 a			and 4)				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
									s, option													
1. Title of	2.	3. Transaction	3A. Deemed		Transaction Code (Instr.				6. Date Ex			7. Title and A			8. Price of	9. Number of		10.	11. Nature			
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution D						Expiration Date (Month/Day/Year)			of Sec Under			Derivative Security	derivative Securities		Ownership Form:	of Indirect Beneficial			
(Instr. 3)	Price of	(monumbay/rear)	(Month/Day/						Deriva				Derivative Security		(Instr. 5)	Beneficially		Direct (D)	Ownership			
	Derivative Security								(Instr. 3 an					14)		Owned Following		or Indirect (I) (Instr. 4)	(Instr. 4)			
																Reported Transaction(s (Instr. 4)	on(e)	1,,,				
																	)11(S)					
														Amount								
														or Number								
						.,			Date		Expiration			of								
				Co	de	V	(A)	(D)	Exercisabl	e	Date	Title	_	Shares								
Restricted Share Unit	\$0 <sup>(1)</sup>	04/01/2019		_   _	4		45,400		04/01/2020	(2)	(2)	Comn		45,400	<b>\$0</b> <sup>(1)</sup>	45,400	0	D				

## **Explanation of Responses:**

- 1. Each restricted stock unit ("RSU") represents the contingent right to receive, upon vesting of the RSU, one share of the Issuer's common stock.
- $2. The \ restricted \ share \ units \ vest \ 40\% \ on \ April \ 1,2020 \ and \ 60\% \ on \ December \ 31,2020, subject \ to \ continued \ service \ through \ each \ vesting \ date.$

/s/ Craig Barrows, attorney in fact 04/08/2019

\*\* Signature of Reporting Person Date

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.