FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | DVAL |
|------------------------|---------------------------------------|
| OMB Number: | 3235-0287 |
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| | OMB Number: Estimated average burd |

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* SKALETSKY MARK B | | | | | | 2. Issuer Name and Ticker or Trading Symbol IMMUNOGEN INC [IMGN] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|--|---------|-----------|---------|--|--|---|---------|--|-----|--------------------|---|-----------------------------------|---------------------------|---|---|---|--|------------|--|
| , | OKALETSKI WAKK D | | | | | | Date of Earliest Transaction (Month/Day/Year) | | | | | | | | Offic | Director Officer (give title | | 10% Owner Other (specify | | |
| (Last) (First) (Middle) 22 PURITAN ROAD | | | | | | 07/01/2004 | | | | | | | | | belov | N) | | below) | | |
| (Street) | Street) NEWTON MA 02461 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Line) | X Form filed by One Reporting Person | | | | on | |
| (City) | (Sta | ate) (2 | Zip) | | | | | | | | | | | | | rm filed by More than One Reporting erson | | | | |
| | | Tabl | e I - Non | -Deriva | ative | Sec | uritie | s Acc | quired, | Dis | posed o | f, or E | Benef | icially | Owne | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | Execution Date | | | n Date, | Code (Instr. 5) | | | | | Securi Benefi Owned | cially I Following | Form: | nership Direct Indirect etr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) | or F | Price | Report Transa (Instr. | action(s) 3 and 4) | | | (Instr. 4) | |
| Common stock | | | | | /2004 | | | A | | 741 | | A | \$6.07 | 1 | 13,759 | | D | | | |
| | 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) | vative Conversion Date urity or Exercise (Month/Day/Year) Execution Date, if any | | | Date, | 4. Transa Code (I 8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | De Se (In | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amou or Numb of Share | er | | | | | | |

Explanation of Responses:

/s/ Virginia A. Lavery, attorney 07/06/2004 in fact

** Signature of Reporting Person

Date

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.