FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| wasnington, | D.C. | 20549 | |
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| Washington, D.C. 20549 | OMB APPROVAL | | | |
|--|--------------|------|--|--|
| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: | 3235 | | |

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| - | 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

| Name and Address of Reporting Person* JUNIUS DANIEL M | | | | 2. Issuer Name and Ticker or Trading Symbol IMMUNOGEN INC [IMGN] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|--|--|--|---|--|--|--|---------------------------------|--|------------------------------------|--------|--|--------------------|---|---|--|--------------------|--|---------------------------------------|---------|
| JUNIUS DANIEL M | | | | | [| | | | | | | X | Director | | | 10% Ov | /ner | | |
| (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | $\overline{}$ | X | Officer (below) | give title | | Other (s below) | pecify | | |
| 830 WINTER STREET | | | | | 07/13/2015 | | | | | | | | Chief Executive Officer | | | | | | |
| (Street) | | | | — ļ | 4. If Am | endment, | Date | of Or | riginal F | iled (| (Month/Day | //Year) | | 6. Ind Line) | ividual or Jo | int/Group | Filing | (Check App | licable |
| WALTH | AM M | IA | 02451 | | | | | | | | | | | X | Form filed by One Reporting Person | | | | |
| (City) | (S | itate) | (Zip) | | | | | | | | | | Form filed by More than One Reporting Person | | | ting | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| Date | | | 2. Transac Date (Month/Da | Execution Date | | Code (Instr. | | | | | 5. Amount Securities Beneficial Owned Fo Reported | Form: ly (D) or | | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | Code V Amount (A) or (D) | | Pri | ce | Transaction(s) (Instr. 3 and 4) | | | | inisti. 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 Date if any (Month/Day/Ye | Code | saction (Instr. | 5. Number Derivative Securities Acquired or Dispos of (D) (In 3, 4 and | re s I (A) sed str. | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction | e s Illy | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | |
| | Code V (A) (D) Exercisable Date | | | | Title | Amou or Numb of Sha | oer | | (Instr. 4) | | | | | | | | | | |
| Stock option (right to buy) | \$16.72 | 07/13/2015 | | A | | 205,000 | | 07/1 | 13/2016 ⁽ | 1) (| 07/13/2025 | Common stock | 205, | 000 | \$16.72 | 205,00 | 00 | D | |

Explanation of Responses:

1. Exercisable as to 68,334 shares commencing on July 13, 2016, 68,333 shares commencing on July 13, 2017 and 68,333 shares commencing on July 13, 2018.

/s/ Craig Barrows, attorney in fact

07/14/2015

** 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.