FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	

STATEMENT	OF CHAN	GES IN BEN	EFICIAL C	WNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average	e burden								
hours per respons	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* <u>Tahir Misbah</u>				2. Issuer Name and Ticker or Trading Symbol IGM Biosciences, Inc. [IGMS]							Check	all appl Direct	onship of Reporting all applicable) Director		rson(s) to Is 10% Ov Other (s	vner			
(Last)	(Fii 1 BIOSCIE	rst) (M	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 11/27/2023						X	below	cer (give title ow) Chief Finance		below)	вреспу			
325 E MIDDLEFIELD ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Line)					.	
(Street) MOUNT VIEW	MOUNTAIN CA 94043												X Form filed by One Reporting Person Form filed by More than One Reporting Person					- 1	
(City)	(St	ate) (Z	Zip)		$ _{\Box}$	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Inst						suant to a							
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/\text{\text{Month/Day/\text{\text{North}}}}			Execution Date,					Acquired (A) or (D) (Instr. 3, 4 a		nd 5) Securi Benefi Owned		ities Fo icially (D d Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 11/15/20				11/15/20	23			A ⁽¹⁾	V	234	A	\$11.	.71		50,945		D		
Common Stock 11/27/202				23			S ⁽²⁾		1,337	D	\$5.059	92 ⁽³⁾ 49,608		9,608		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)	2. Conversion or Exercise Price of Derivative Security	onversion Date Execution Date, Transaction Code (Instr. rice of erivative (Month/Day/Year) Execution Date, Transaction Code (Instr. 8)		Instr.	5. Numof Derive Security Acquired (A) or Disposof (D) (Instr. and 5	ative rities ired osed	Expi (Mor	ration E	Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of		nt of ities rlying ative ity (Instr. 4) Amount or Number	t		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. The shares were acquired under the IGM Biosciences, Inc. 2019 Employee Stock Purchase Plan in a transaction that was exempt under both Rule 16b-3(d) and Rule 16b-3(c).
- 2. These shares were sold to cover tax withholding obligations in connection with the vesting of restricted stock units.
- 3. This transaction was executed in multiple trades at prices ranging from \$4.96 to \$5.33. The price reported above reflects the weighted average sale price. The Reporting Person undertakes to provide upon request by the staff of the Securities and Exchange Commission, the Issuer, or a security holder of the Issuer, full information regarding the number of shares sold at each separate sale price.

Remarks:

/s/ Misbah Tahir

11/29/2023

** 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.