FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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* LOBERG MICHAEL D						2. Issuer Name and Ticker or Trading Symbol IGM Biosciences, Inc. [IGMS]									ck all app Direc	licable) tor		erson(s) to Issuer 10% Owner	
(Last) (First) (Middle) C/O IGM BIOSCIENCES, INC. 325 E. MIDDLEFIELD ROAD						3. Date of Earliest Transaction (Month/Day/Year) 12/31/2021									below	er (give title v)	Э	Other below	(specify
(Street) MOUNTAIN VIEW CA 94043				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Appli Line) X Form filed by One Reporting Person Form filed by More than One Reportin Person					son	
(City)	(St		Zip)																
Table I - Non-Deriv. 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ion	2A. De Execu	2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)		ed (A) o	or 5. Amount of		nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	Amount	(A) or (D)	Price	:	Transaction(s) (Instr. 3 and 4)				(111501.4)			
Common	10/06/2021				G	V	300	D	\$0.	00	0 0			D					
Common Stock				10/06/2021				G	V	300	A	\$0.	300		00	I		See footnote ⁽¹⁾	
Common Stock 12				12/31/2	12/31/2021				A		300(2)	A	\$0.	00 300		00	D		
Common Stock															29,	547		T I	See footnote ⁽³⁾
Common Stock															12,	996			See footnote ⁽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)	erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expira (Month	tion D		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Di Si (li	Price of erivative ecurity nstr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date		Amoun or Number of Shares						

Explanation of Responses:

- 1. The shares are held by the Revocable Deed of Trust of Michael D. Loberg (Michael and Melinda Loberg, Trustees), of which Reporting Person and his spouse serve as trustees.
- 2. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock. The amount reflects payment of a quarterly retainer in common stock pursuant to the Issuer's Outside Director Compensation Policy.
- 3. The shares are held by the Michael D. Loberg Qualified Annuity Interest Trust VII (Michael and Melinda Loberg, Trustees), of which Reporting Person and his spouse serve as trustees.
- 4. The shares are held by the Michael D. Loberg Qualified Annuity Interest Trust VIII (Michael and Melinda Loberg, Trustees), of which Reporting Person and his spouse serve as trustees.

Remarks:

/s/ Misbah Tahir, by power of attorney ** Signature of Reporting Person

01/04/2022

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.