FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL										
OMB Number: 3235-0287										
Estimated average burden										
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*  LOBERG MICHAEL D					2. Issuer Name and Ticker or Trading Symbol IGM Biosciences, Inc. [ IGMS ]								(Che	eck all app	,		10%	Owner	
		rst) (t NCES, INC. CLD ROAD	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/31/2021								below	)		below	,		
(Street)  MOUNT VIEW  (City)	C.F		14043 Zip)		4. If A	Amend	ment,	Date o	of Origin	ial File	ed (Month/Da	y/Year)		Line)	) 【 Form	filed by O	ne Rej	ng (Check porting Pe an One Re	
				n-Deriva	tive S	Secu	rities	Acc	uired	, Dis	sposed of	, or B	enef	icial	ly Own	ed			
1. Title of Security (Instr. 3)		Date	oate Ex Month/Day/Year) if		Execution Date,		3. 4. Sec Transaction Dispo Code (Instr. 8)		Disposed Of	ecurities Acquired (A) posed Of (D) (Instr. 3, 4		or 5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) or (D)	Pric	e	Transact (Instr. 3	ion(s)			(111311.4)	
Common	Stock			01/11/2	021	)21		G	V	535	D	\$0	0.00		0		D		
Common	Stock			01/11/2	)21		G	V	535	A	\$0	0.00	2,140			I	See footnote <sup>(1)</sup>		
Common	Stock			03/31/2	021				A		300(2)	A	\$0	0.00 300 D					
Common	Stock														39,803 I See foots			See footnote <sup>(3)</sup>	
	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)	ve Conversion Date Execution Date, Transaction of One Exercise (Month/Day/Year) if any Code (Instr. Derivation Date, Code (Instr. Derivation Date) Date (Ins				rative rities ired r osed )	6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Amount of Securities Underlying Derivative Security (Ir 3 and 4)				nt of ities lying ative ity (Ins	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)			
				Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amou or Numb of Share	er						

## **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.

## Remarks:

/s/ Misbah Tahir, by power of attorney

04/02/2021

\*\* 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.