MACROGENICS INC Form 3 October 09, 2013 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL

3235-0104 Number: January 31, Expires: 2005 Estimated average burden hours per 0.5 response...

(Print or Type Responses)

1. Name and Ac Person <u>*</u> STUMP I		orting	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol MACROGENICS INC [MGNX]					
(Last)	(First)	(Middle)	10/09/2013	4. Relationship Person(s) to Is		g 5. If Amendment, Date Orig Filed(Month/Day/Year)	inal		
C/O MACROGENICS, INC., 9640 MEDICAL CENTER DRIVE (Street)				(Check all applicable) X_ Director 10% Owner Officer Other		Owner			
ROCKVILL	. ,	20850		(give title below		o. mai riduai or yoma Group	ng		
(City)	(State)	(Zip)	Table I - N	Non-Derivati	ive Securiti	ies Beneficially Owned			
1.Title of Secur (Instr. 4)	ity		2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Reminder: Repo owned directly o	-	ate line for ea	ch class of securities benefici	ially SI	EC 1473 (7-02	2)			
	inform require	ation conta ed to respo	oond to the collection of ained in this form are not nd unless the form displ MB control number.						
T	able II - Der	ivative Secu	rities Beneficially Owned (e.	.g., puts, calls,	warrants, opt	tions, convertible securities)			

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)	

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Shares

or Indirect (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
STUMP DAVID C C/O MACROGENICS, INC. 9640 MEDICAL CENTER DRIVE ROCKVILLE, MD 20850	ÂX	Â	Â	Â				
Signatures								
/s/ Lynn Cilinski, attorney-in-fact	10/09/20	013						
<u>**</u> Signature of Reporting Person	Date							
Explanation of Responses:								

No securities are beneficially owned

- * If the form is filed by more than one reporting person, *see* Instruction 5(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).

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Remarks:

Exhibit 24 - Power of Attorney

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.