## Edgar Filing: Williams Peter J. - Form 4

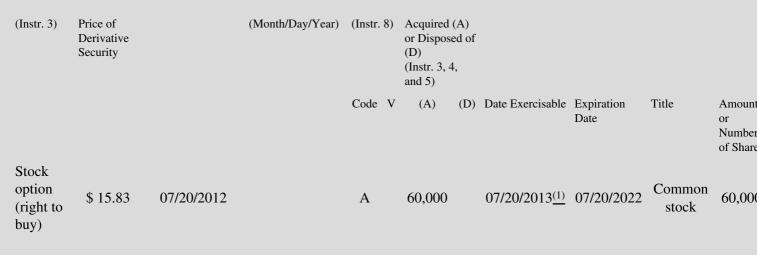
FORM 4       OMB APPROVAL         UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549       OMB Number:       3235-028         Check this box if no longer subject to Section 16.       STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP SECURITIES       Expires:       200 200         Estimated were burden hours per	Williams P Form 4 July 23, 20								
Under the source of the second term of term o	FORM A								
if no longer subject to Section 16.       STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16.       Expires:       200 200 200 200 200 200 200 200 200 200	UNITED STATES SECURITIES AND EACHANGE COMMIS					COMMISSION	ONID	3235-0287	
1. Name and Address of Reporting Person <sup>±</sup> 2. Issuer Name and Ticker or Trading Symbol       5. Relationship of Reporting Person(s) to Issuer         (Last)       (First)       (Middle)       3. Date of Earliest Transaction (Month/Day/Year)       (Check all applicable)         C/O IMMUNOGEN, INC.       07/20/2012	if no lo subject Section Form 4 Form 5 obligat may co <i>See</i> Ins	nger to 16. or Filed put ions ntinue.	rsuant to Section (a) of the Public	<b>SECUI</b> 16(a) of th Utility Hol	GES IN BENEFICIAL OWNERSHIP OF SECURITIES 5(a) of the Securities Exchange Act of 1934, ility Holding Company Act of 1935 or Section				urs per
Williams Peter J. Symbol IMMUNOGEN INC [IMGN] (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)Director10% Owner C/O IMMUNOGEN, INC. 07/20/2012Officer (give titleOther (specify below) VP, Business Development (Street) 4. If Amendment, Date Original Filed(Month/Day/Year)Form filed by One Reporting Person Form filed by One Reporting Person 	(Print or Type	e Responses)							
(Last)       (First)       (Middle)       3. Date of Earliest Transaction         (Last)       (First)       (Middle)       3. Date of Earliest Transaction         (Month/Day/Year)		Symbol	Symbol			Issuer			
C/O IMMUNOGEN, INC. (Month/Day/Year) 07/20/2012 (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) (City) (City) (State) (City) (State) (City) (State) (City) (State) (City) (State) (City) (State) (City) (Month/Day/Year) (State) (City) (Month/Day/Year) (State) (City) (State) (City) (Month/Day/Year) (State) (City) (Month/Day/Year) (State) (City) (State) (City) (State) (City) (State) (City) (State) (City) (State) (City) (State) (City) (State) (City) (State) (City) (Month/Day/Year) (Zip) Table I - Non-Derivative Securities State) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Instr. 3) (Month/Day/Year) (Month	(Last)	(First) (				(Che	eck all applicabl	e)	
Filed(Month/Day/Year)       Applicable Line)         X_ Form filed by One Reporting Person	. ,	(Month	(Month/Day/Year)			$\underline{X}$ Officer (give title $\underline{M}$ Other (specify below)			
WALTHAM, MA 02431       Person         (City)       (State)       (Zip)       Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned         1.Title of Security       2. Transaction Date       2A. Deemed       3.       4. Securities       5. Amount of       6. Ownership       7. Nature of         Indirect       (Month/Day/Year)       Execution Date, if       3.       4. Securities       5. Amount of       6. Ownership       7. Nature of         Instr. 3)       (Month/Day/Year)       (Instr. 8)       (Instr. 3, 4 and 5)       Owned       (I)       Ownership         Following       (Instr. 4)       (Instr. 4)       (Instr. 4)       (Instr. 4)			-			Applicable Line) _X_ Form filed by One Reporting Person			
1.Title of Security (Instr. 3)       2. Transaction Date (Month/Day/Year)       2A. Deemed Execution Date, if any (Month/Day/Year)       3.       4. Securities TransactionAcquired (A) or Code       5. Amount of Security (Instr. 8)       6. Ownership Form: Direct       7. Nature of Indirect         0. Worth/Day/Year)       any (Month/Day/Year)       Code (Instr. 8)       Disposed of (D) (Instr. 8)       Beneficially Owned (Instr. 3, 4 and 5)       6. Ownership Form: Direct       Indirect         (A) or       (A) (Instr. 3 and 4)       (Instr. 4)       (Instr. 4)	WALTHA	M, MA 02451						More than One K	eporting
Security (Month/Day/Year) Execution Date, if TransactionAcquired (A) or (Instr. 3) Execution Date, if TransactionAcquired (A) or any Code Disposed of (D) (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned (I) Ownership Following (Instr. 4) (Instr. 4) (A) or (Instr. 3 and 4)	(City)	(State)	(Zip) Ta	ble I - Non-	Derivative S	ecurities A	Acquired, Disposed	of, or Beneficia	lly Owned
	Security		Execution Date, if any	TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or		Securities Beneficially Owned Following Reported Transaction(s)	Form: Direct (D) or Indirect (I)	Indirect Beneficial Ownership	
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Persons who respond to the collection of information contained in this form are not required to respond unless the form	Reminder: Ro	eport on a separate line	e for each class of se	curities bene	Person	s who res	spond to the colle tained in this form	n are not	

number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount o
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Williams Peter J. C/O IMMUNOGEN, INC. WALTHAM, MA 02451			VP, Business Development			
Signatures						

/s/ Craig Barrows, attorney in fact <u>\*\*Signature of Reporting Person</u> Date

## **Explanation of Responses:**

- \* 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).
- (1) Exercisable as to 20,000 shares commencing on July 20, 2013, 20,000 shares commencing on July 20, 2014 and 20,000 shares commencing on July 20, 2015.

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.