(City)

(State)

1. Name and Address of Reporting Person*

(Zip)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

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

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

> > 7. Nature of Indirect Beneficial Ownership (Instr. 4)

11. Nature of Indirect Beneficial Ownership (Instr. 4)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

				UI ·	Jecu	1011 30	0(11) 01	LITE IIIV	CSu	mem	Company Act	01 1340							
1. Name and Address of Reporting Person* COLUMN GROUP L P		<u>N</u>	2. Issuer Name and Ticker or Trading Symbol NGM BIOPHARMACEUTICALS INC NGM] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner Officer (give title Other (spec									wner							
(Last)	(F	irst) (Middle)												belov		itie	Otner below)	
l	VENS STF		,	3. 1	Date	of Ea	arliest 7	ransa	ction	n (Mc	onth/Day/Year))							
SUITE 5				04	/08/	2020)												
(Street)				4. 1	lf Am	endn	nent, D	ate of	Orig	ginal	Filed (Month/D	Day/Year	·)	6. I Lin		r Joint/G	roup Fili	ng (Check /	Applicable
SAN	C	Δ	M158												,	filed by	One Re	porting Per	son
FRANCISCO CA 94158														X Form		More th	an One Rep	oorting	
(City)	(5		Zip)																
		Table	I - Non-Deriv	ative	Se	curi	ities	Acqu	iire	ed, E	Disposed o	of, or I	3enef	icia	lly Own	ed			
"""		2. Transaction Date (Month/Day/Y	ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Trar Cod	3. Transaction Code (Instr. 8)				quired (A) or) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirec Beneficia Ownershi (Instr. 4)		
								Cod	le	V	Amount	(A) or (D)	Price		Transaction (Instr. 3 au				(
Common			04/08/202	20				P	4		112,602(1)	A	\$14	.95	1,540 16,166)(2)(3))(7)(8)(9)(10)	
Common									\dashv						15,0		-	D ⁽¹¹⁾	
		Ta	ble II - Derivat												y Owne	d			
	1.	T		_	call	s, w			_		s, converti	_		Ť		Ι		Γ.	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)		isacti e (Ins		5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr. and 5)	tive (ties ed	Expi	iratio	kercisable and n Date ay/Year)	Amo Secu Unde Deriv		tr.	8. Price of Derivative Security (Instr. 5)	9. Numl derivati Securiti Benefic Owned Followi Reporte Transac (Instr. 4	ive ies ially ng ed ction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Benefic Owners (Instr. 4
				Cod	e V	,	(A)		Date Exer	e rcisal	Expiration Date	n Title	Amou or Numb of Share	er					
ı		of Reporting Person	*																
(Last) 1700 OV SUITE 5	VENS STF	(First)	(Middle)																
(Street) SAN FRANCE	ISCO	CA	94158																
(City)		(State)	(Zip)																
ı		of Reporting Person	·																
(Last) 1700 OV SUITE 5	VENS STF	(First) REET	(Middle)																
(Street) SAN	ISCO	CA	94158																

(Last)	(First)	(Middle)
1700 OWENS ST	TREET	
SUITE 500		
(Street)		
SAN	CA	94158
FRANCISCO	CA	94130
(City)	(State)	(Zip)
1. Name and Address	s of Reporting Person*	
Column Group	<u>p Management L</u>	<u>.P</u>
(Last)	(First)	(Middle)
1700 OWENS ST		
SUITE 500		
(Street)		
(Street) SAN		0.4450
FRANCISCO	CA	94158
(City)	(State)	(Zip)
	s of Reporting Person*	(<u>-</u> 'P)
PONOI CAPI	· -	
(Last)	(First)	(Middle)
1700 OWENS ST		• • • • •
SUITE 500		
(Street)		
		0.44.50
SAN	CA	94158
FRANCISCO	CA	94158
	CA (State)	(Zip)
FRANCISCO (City) 1. Name and Address	(State)	
FRANCISCO (City)	(State)	
FRANCISCO (City) 1. Name and Address Ponoi Manage	(State) s of Reporting Person* ement, LLC	(Zip)
FRANCISCO (City) 1. Name and Address	(State) s of Reporting Person* ement, LLC (First)	
FRANCISCO (City) 1. Name and Address Ponoi Manage (Last)	(State) s of Reporting Person* ement, LLC (First)	(Zip)
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500	(State) s of Reporting Person* ement, LLC (First)	(Zip)
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500	(State) s of Reporting Person* ement, LLC (First) CREET	(Zip) (Middle)
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street)	(State) s of Reporting Person* ement, LLC (First)	(Zip)
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN	(State) s of Reporting Person* ement, LLC (First) CREET	(Zip) (Middle)
FRANCISCO (City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City)	(State) s of Reporting Person* ement, LLC (First) CREET CA (State)	(Zip) (Middle) 94158
FRANCISCO (City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City)	(State) s of Reporting Person* ement, LLC (First) CREET CA (State) s of Reporting Person*	(Zip) (Middle) 94158
FRANCISCO (City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address	(State) s of Reporting Person* ement, LLC (First) CREET CA (State) s of Reporting Person*	(Zip) (Middle) 94158
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address Ponoi Capital	(State) s of Reporting Person* ement, LLC (First) CA (State) s of Reporting Person* II, LP (First)	(Zip) (Middle) 94158 (Zip)
FRANCISCO (City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address Ponoi Capital (Last)	(State) s of Reporting Person* ement, LLC (First) CA (State) s of Reporting Person* II, LP (First)	(Zip) (Middle) 94158 (Zip)
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address Ponoi Capital (Last) 1700 OWENS ST SUITE 500	(State) s of Reporting Person* ement, LLC (First) CA (State) s of Reporting Person* II, LP (First)	(Zip) (Middle) 94158 (Zip)
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address Ponoi Capital (Last) 1700 OWENS ST SUITE 500 (Street) SAN	(State) s of Reporting Person* ement, LLC (First) CREET CA (State) s of Reporting Person* II, LP (First) CREET	(Zip) (Middle) 94158 (Zip)
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address Ponoi Capital (Last) 1700 OWENS ST SUITE 500 (Street)	(State) s of Reporting Person* ement, LLC (First) CA (State) s of Reporting Person* II, LP (First)	(Zip) (Middle) 94158 (Zip)
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address Ponoi Capital (Last) 1700 OWENS ST SUITE 500 (Street) SAN	(State) s of Reporting Person* ement, LLC (First) CREET CA (State) s of Reporting Person* II, LP (First) CREET	(Zip) (Middle) 94158 (Zip)
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address Ponoi Capital (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) (City) (City) (City)	(State) s of Reporting Person* ement, LLC (First) CREET CA (State) s of Reporting Person* II, LP (First) CREET	(Zip) (Middle) 94158 (Zip) (Middle)
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address Ponoi Capital (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) (City) (City) (City)	(State) s of Reporting Person* ement, LLC (First) CA (State) s of Reporting Person* II, LP (First) CREET CA (State) s of Reporting Person*	(Zip) (Middle) 94158 (Zip) (Middle)
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address Ponoi Capital (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address Ponoi Capital (Last) 1700 OWENS ST SUITE 500 (City) 1. Name and Address	(State) s of Reporting Person* ement, LLC (First) CREET CA (State) s of Reporting Person* II, LP (First) CREET CA (State) s of Reporting Person* agement, LLC	(Zip) (Middle) 94158 (Zip) (Middle)
(City) 1. Name and Address Ponoi Manage (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address Ponoi Capital (Last) 1700 OWENS ST SUITE 500 (Street) SAN FRANCISCO (City) 1. Name and Address (Last) 1700 OWENS ST SUITE 500 (City) 1. Name and Address	(State) s of Reporting Person* ement, LLC (First) CREET CA (State) s of Reporting Person* II, LP (First) CREET CA (State) s of Reporting Person* agement, LLC (First)	(Zip) (Middle) 94158 (Zip) (Middle)

(Street) SAN FRANCISCO	CA	94158								
(City)	(State)	(Zip)								
1. Name and Address of Reporting Person*										
<u>Kutzkey Tim</u>										
(Last)	(First)	(Middle)								
1700 OWENS STREET										
SUITE 500										
(Street)										
SAN FRANCISCO	CA	94158								
FRANCISCO										
(City)	(State)	(Zip)								
1. Name and Address of Reporting Person* <u>Column Group II GP, LP</u>										
(Last)	(First)	(Middle)								
1700 OWENS STREET										
SUITE 500										
(Street)										
SAN	CA	94158								
FRANCISCO										
(City)	(State)	(Zip)								

Explanation of Responses:

- 1. Consists of 52,882 shares of Common Stock held directly by The Column Group III, LP ("TCG III LP") and 59,720 shares of Common Stock held directly by The Column Group III-A, LP ("TCG III-A LP").
- 2. The securities are directly held by TCG III, and indirectly held by The Column Group III GP, LP ("TCG III GP"), the general partner of TCG III. The managing partners of TCG III GP are David Goeddel, Peter Svennilson and Tim Kutzkey. The managing partners of TCG III GP may be deemed to have voting and investment power with respect to such shares. Each individual managing partner disclaims beneficial ownership of these shares, except to the extent of his pecuniary interest in such shares.
- 3. The securities are directly held by TCG III-A LP, and indirectly held by TCG III GP, the general partner of TCG III-A LP. The managing partners of TCG III GP are David Goeddel, Peter Svennilson and Tim Kutzkey. The managing partners of TCG III GP may be deemed to have voting and investment power with respect to such shares. Each individual managing partner disclaims beneficial ownership of these shares, except to the extent of his pecuniary interest in such shares.
- 4. Consists of 11,103,333 shares of Common Stock held directly by The Column Group, LP ("TCG LP"), 2,265,758 shares of Common Stock held directly by The Column Group II, LP ("TCG II LP"), 100,000 shares of Common Stock held directly by The Column Group GP, LP ("TCG GP"),100,000 shares of Common Stock held directly by The Column Group Management, LP ("TCGM LP"), 1,298,908 shares of Common Stock held directly by Ponoi Capital, LP ("Ponoi II LP").
- 5. The securities are directly held by TCG LP, and indirectly held by TCG GP, the general partner of TCG LP. The managing partners of TCG GP are David Goeddel and Peter Svennilson. The managing partners of TCG GP may be deemed to have voting and investment power with respect to such shares. Each individual managing partner disclaims beneficial ownership of these shares, except to the extent of his pecuniary interest in such shares.
- 6. The securities are directly held by TCG II LP, and indirectly held by The Column Group II GP, LP ("TCG II GP"), the general partner of TCG II LP. The managing partners of TCG II GP may be deemed to have voting and investment power with respect to such shares. Each individual managing partner disclaims beneficial ownership of these shares, except to the extent of his pecuniary interest in such shares.
- 7. The securities are directly held by TCG GP. The managing partners of TCG GP are David Goeddel and Peter Svennilson. The managing partners of TCG GP may be deemed to have voting and investment power with respect to such shares. Each individual managing partner disclaims beneficial ownership of these shares, except to the extent of his pecuniary interest in such shares.
- 8. The securities are directly held by TCGM LP. The managing partners of TCGM LP are David Goeddel and Peter Svennilson. The managing partners of TCGM LP may be deemed to have voting and investment power with respect to such shares. Each individual managing partner disclaims beneficial ownership of these shares, except to the extent of his pecuniary interest in such shares.
- 9. The securities are directly held by Ponoi LP, and indirectly held by Ponoi LLC are David Goeddel, Peter Svennilson and Tim Kutzkey. The managing partners of Ponoi LLC may be deemed to have voting and investment power with respect to such shares. Each individual managing partner disclaims beneficial ownership of these shares, except to the extent of his pecuniary interest in such shares.
- 10. The securities are directly held by Ponoi II LP, and indirectly held by Ponoi II Management, LLC ("Ponoi II LLC"), the general partner of Ponoi II LP. The managing partners of Ponoi II LLC are David Goeddel, Peter Svennilson and Tim Kutzkey. The managing partners of Ponoi II LLC may be deemed to have voting and investment power with respect to such shares. Each individual managing partner disclaims beneficial ownership of these shares, except to the extent of his pecuniary interest in such shares.
- 11. These securities are owned solely by Tim Kutzkey.

Remarks:

Due to SEC restrictions on the number of reporting owners, this is Form 1 of 2.

/s/ Jennifer J. Carlson, Attorney-in-Fact 04/09/2020

** 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.